01/28/2010 10:32

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FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

T OTTIWI OX	For Other Than An Authorized Comm	nittee Office Use Only
NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT	ping, type
HCR Manor Care PAC		
ADDRESS (number and street)	333 North Summit Street	
The Address (number and street)	ı 16th Floor	
Check if different than previously	Talada	011 10014 0017
reported. (ACC)	Toledo	OH 43604 - 2617
2. FEC IDENTIFICATION NU	MBER W CITY	STATE A ZIPCODE A
C00260141	3. IS THIS REPORT	NEW (N) OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Feb 20 (M2) Due On: Mar 20 (M3)	May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:	IVIAI 20 (IVIS)	Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only)
April 15	Apr 20 (M4)	Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
Quarterly Report(July 15	(c) 12-Day Primary (12P) General (12G) Runoff (12R)
Quarterly Report(October 15	Q2) PRE-Election Report for the: Convention	on (12C) Special (12G)
Quarterly Report(23)	
X January 31 Quarterly Report(YE) Election on	in the State of
July 31 Mid-Year Report(Non-electi Year Only) (MY)	on (d) 30-Day Post -Election General ((30G) Runoff (30R) Special (30S)
Termination Repo	Election on	in the State of
5. Covering Period 0	7 0 1 2 0 0 9 throug	gh 12 31 2009
I certify that I have examined this	Report and to the best of my knowledge and belief	it is true, correct and complete.
Type or Print Name of Treasurer	Mr. Frank Jannazo	
Signature of Treasurer Electr	onically Filed by Mr. Frank Jannazo	Date 01 28 2010
NOTE : Submission of false, err	oneous, or incomplete information may subject the p	person signing this Report to the penalties of 2 U.S.C 437g.
Office Use		FEC FORM 3X (Rev. 12/2004)

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2 / 87

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

	HCR Manor Care PAC		
F	Report Covering the Period: From:	01 2009	To: D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2009 Y Y Y		29282.99
	(b) Cash on Hand at Begining of Reporting Period	34812.97	
	(c) Total Receipts (from Line 19)	104230.01	212590.87
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	139042.98	241873.86
7.	Total Disbursements (from Line 31)	107160.81	209991.69
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	31882.17	31882.17
9.	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 87

Write or Type Committee Name HCR Manor Care PAC

Report Covering the Period:

From: 0.7

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2009

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Y Y Y Y Y 2 0 0 9

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	93600.83	181104.51
	(ii) Unitemized	10320.11	31161.68
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	103920.94	212266.19
(1	b) Political Party Committees	0.00	0.00
,	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	103920.94	212266.19
	ransfers From Affiliated/Other	0.00	0.00
3. <i>A</i>	All Loans Received	0.00	0.00
	oan Repayments Received	0.00	0.00
(Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Political Committees	300.00	300.00
	Other Federal Receipts Dividends, Interest, etc.)	9.07	24.68
	ransfers from Non-Federal and Levin Funds		
(;	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(1	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	104230.01	212590.87
	otal Federal Receipts subtract Line 18(c) from Line 19)	104230.01	212590.87

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 87

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	110.81	191.69
	Expenditures(c) Total Operating Expenditures	110.01	131.03
	(add 21(a)(i), (a)(ii) and (b))	110.81	191.69
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	99000.00	182500.00
24.	Independent Expenditure	0.00	0.00
25.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (c))	* * * * * * * * * * * * * * * * * * * *	0 0 0 0 0 0 0 0
9.	Other Disbursements	8050.00	27300.00
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	107160.81	209991.69
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	107160.81	209991.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 87

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) from Line 11(d), page 3)	103920.94	212266.19
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
Net Contributions (other than loans) (subtract Line 34 from Line 33)	103920.94	212266.19
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	110.81	191.69
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	110.81	191.69

FE6AN026

Any information copied from such Reports and Statements may not be ead or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) HCR Manor Care PAC Full Name (Last, First, Middle Initial) Charlean Adians Malling Address 3523 East Manitou Circle City State Zip Code Muskegeon Mil 49441 FEC 10 number of contributing federal political committee. Name of Emgloyer City State Zip Code Transaction (D: SA111A.30747 Amount of Each Receipt this Period FEC 10 number of contributing for State Zip Code Other (specify) ▼ State Zip Code Transaction (D: SA111A.30748 Bi-Weekly Payroll Contrib- City State Zip Code Transaction (D: SA111A.30748 Transaction (D: SA111A.30748 Amount of Each Receipt this Period FEC 10 number of contributing for Emgloyer City State Zip Code Transaction (D: SA111A.30748 Amount of Each Receipt this Period FEC 10 number of Contributing FEC 10 number of Contributing for Emgloyer City State Zip Code Other (specify) ▼ State Zip Code Transaction (D: SA111A.30748 Bi-Weekly Payroll Contrib- Bi-Weekly Payro	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Full Name (Last, First, Middle Initial) Charlean Address Mailing Address 3523 East Manitou Circle City Muskegeon Mul 49441 FEC ID number of contributing federal political committee. Name of Employer HCR Manor Cate, Inc. Receipt For: Primary General Other (specify) ▼ I'l 2 23 1 2009 Transaction ID: SA11Al.30747 Amount of Each Receipt this Period FEU ID number of contributing III Name (Last, First, Middle Initial) Ma Glayla M. Adams Mailing Address 239 County Rd 4328 City Tenaha TX 75974 FEU ID number of contributing federal political committee. Name of Employer HCR Manor Cate, Inc. Aggregate Year-to-Date ▼ Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Barmak Abbar-thanizadeh Mailing Address 5514 Waterford Circle City State Zip Code Transaction ID: SA11Al.30748 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Barmak Abbar-thanizadeh Mailing Address 5514 Waterford Circle City State Zip Code Sheffield Village OH 44035 FEC ID number of contributing federal political committee. City State Zip Code Sheffield Village OH 44035 FEC ID number of contributing federal political committee. City State Zip Code Sheffield Village OH 44035 FEC ID number of contributing federal political committee. City State Zip Code Sheffield Village OH 44035 FEC ID number of contributing federal political committee. City State Zip Code Sheffield Village OH 44035 FEC ID number of contributing federal political committee. City Sheffield Village OH 44035 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Firmary General Other (specify) ▼ Aggregate Year-to-Date Firmary General Other (specify) ▼ Bi-Weekly Payroll Contribution S36:92	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Ms Gayla M. Adams Mailing Address 239 County Rd 4328 City State Zip Code Transaction ID: SA11Al.30748 Tenaha TX 75974 FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Primary General Other (specify) ▼ State Zip Code Transaction ID: SA11Al.30748 Amount of Each Receipt this Period Bi-Weekly Payroll Contribution \$391.25 Bi-Weekly Payroll Contribution \$26.15 Bi-Weekly Payroll Contribution \$26.15 Date of Receipt Warms Amount of Each Receipt this Period Bi-Weekly Payroll Contribution \$26.15 Bi-Weekly Payroll Contribution \$26.15 Transaction ID: SA11Al.30749 Amount of Each Receipt this Period Date of Receipt Warms Amount of Each Receipt this Period Eclip State Zip Code OH 44035 FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Name of Employer HCR Manor Care, Inc. Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	Full Name (Last, First, Middle Initial) Charlean Adams Mailing Address 3523 East Manitou Cir City Muskegeon FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General	State Zip Code MI 49441 C Occupation Administrator Aggregate Year-to-Date 2284.50	Transaction ID: SA11AI.30747 Amount of Each Receipt this Period 549.90 Bi-Weekly Payroll Contrib-
Mailing Address 5514 Waterford Circle City State Zip Code Sheffield Village OH 44035 FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify) ▼ Date of Receipt 12 23 2009 Transaction ID: SA11AI.30749 Amount of Each Receipt this Period Bi-Weekly Payroll Contribution \$36.92	Ms Gayla M. Adams Mailing Address 239 County Rd 4328 City Tenaha FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General	State Zip Code TX 75974 C Occupation Administrator - Holiday Aggregate Year-to-Date	Transaction ID: SA11AI.30748 Amount of Each Receipt this Period 391.25
SUBTOTAL of Receipts This Page (optional)	Barmak Akbar-khanzadeh Mailing Address 5514 Waterford Circle City Sheffield Village FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General	State Zip Code OH 44035 C Occupation Divisional Dir Ops Support Aggregate Year-to-Date ▼	Transaction ID: SA11AI.30749 Amount of Each Receipt this Period 369.20
	SUBTOTAL of Receipts This Page (optional)		1310.35

SCHEDULE ITEMIZED R	A (FEC Form 3X) ECEIPTS	Use separate sched for each category on Detailed Summary	f the Contect of the
or for commercial p	urposes, other than using the r	tements may not be sold or used by ame and address of any political co	y any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
	First, Middle Initial) P.O. Box 916 of contributing committee.	State Zip Code IN 46142 C Occupation Administrator Aggregate Year-to-Date	Date of Receipt M M
Primary Other (spe	First, Middle Initial)		Date of Receipt M
Sylvania FEC ID number federal political of Employ HCR ManorCard Receipt For: Primary Other (spe	er e Inc.	State Zip Code OH 43560 C Occupation AVP / Dir Internal Aud & Ris Aggregate Year-to-Date ▼ 262	Transaction ID: SA11AI.30751 Amount of Each Receipt this Period 1300.00 Bi-Weekly Payroll Contribution \$100.00
Full Name (Last Sandy K Annesse Mailing Address City Waterville FEC ID number federal political of Name of Employ HCR ManorCard Receipt For: Primary Other (special of Sandy K Annesse Sandy	of contributing committee.	State Zip Code OH 43566 C Occupation CBO Director Aggregate Year-to-Date ▼	Date of Receipt M
SUBTOTAL of Re	ceipts This Page (optional)		1704.95

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
\	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any per ename and address of any political committed	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Michael Armstrong Mailing Address 115 N. Remington Ro City	. State Zip Code	Date of Receipt M
	Bexley FEC ID number of contributing federal political committee.	OH 43209	Amount of Each Receipt this Period 372.60
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 542.40	Bi-Weekly Payroll Contribution \$24.90
	Full Name (Last, First, Middle Initial) Lisa Arnold Mailing Address 36832 Meadow Creek	Ct	Date of Receipt 1 1 1 1 8 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.30762
	Magnolia	TX 77355	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	275.00
	Name of Employer HCR ManorCare Inc.	Occupation Sr Administrator	Bi-Weekly Payroll Contrib- ution \$25.00
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial) Deborah A Arrendale	1	Date of Receipt
	Mailing Address 7100 Sunshine Skywa #401		12 / 31 / 2009
	City St. Petersburg	State Zip Code FL 33711	Transaction ID: SA11AI.30763 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	859.95
	Name of Employer HCR ManorCare, Inc.	Occupation 4H East Div. General Mgr.	Bi-Weekly Payroll Contrib- ution \$31.85
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1019.20	
Γ	SUBTOTAL of Receipts This Page (optional) .	I	1507.55

SCHEDULE A	(FEC Form 3X) CEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copies or for commercial purp NAME OF COMM HCR Manor Cal	poses, other than using the name and ITTEE (In Full)	may not be sold or used by any pers address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, F Matthew Baad	State MI contributing nmittee. Inc. General General	48843	Date of Receipt M M M
Full Name (Last, F Terri Ballesteros	state CA contributing nmittee. C C C C C C C C C C C C C C C C C C C	95667	Date of Receipt M M M
Full Name (Last, F Paul J Barber Mailing Address City Freeport FEC ID number of federal political cor Name of Employer HCR ManorCare, Receipt For: Primary Other (specie	State MI contributing nmittee. C Occup Admin Aggree General	49325	Date of Receipt M M M
	ipts This Page (optional)	<u> </u>	740.97

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any persele name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) L Jennifer Baron Mailing Address 557 Jefferson St. City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Pittsburgh FEC ID number of contributing federal political committee. Name of Employer	PA 15237 C Occupation	Amount of Each Receipt this Period 195.00 Bi-Weekly Payroll Contrib-
Name of Employer HCR Manor Care, Inc Receipt For: Primary General Other (specify) ▼	Administrator Aggregate Year-to-Date ▼ 345.00	ution \$15.00 *
Full Name (Last, First, Middle Initial) Suzanne L Baron Mailing Address 134 Lakeshore Dr. #	414	Date of Receipt
City	State Zip Code	Transaction ID: SA11AI.30773
North Palm Beach FEC ID number of contributing federal political committee.	FL 33408	Amount of Each Receipt this Period 280.00
Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contribution \$20.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) Joseph A Barrick		Date of Receipt
Mailing Address 448 Woodcrest Dr		12 23 2009
City	State Zip Code	Transaction ID: SA11AI.30774
Mechanicsburg FEC ID number of contributing federal political committee.	PA 17050	Amount of Each Receipt this Period 351.00
Name of Employer HCR ManorCare Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$27.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	
SUBTOTAL of Receipts This Page (optional)	1	826.00

SCHEDUL	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercia	al purposes, other than using the DMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (La Theresa A Bed Mailing Addre		State	Zip Code	Date of Receipt 1 2 2 3 2 0 0 9 Transaction ID: SA11AI.30776
Tremont	per of contributing al committee.	PA C	17981	Amount of Each Receipt this Period 65.00
Name of Emp HCR Manor (Receipt For: Primary Other (s		Occupation ADNS Aggregate	Year-to-Date ▼ 215.67	Bi-Weekly Payroll Contribution \$5.00
Full Name (La Julie A Becker Mailing Addre		1		Date of Receipt 1 2 2 3 2 0 0 9
	per of contributing	State OH	Zip Code 43613	Transaction ID: SA11AI.30777 Amount of Each Receipt this Period 539.89
Name of Emp HCR Manor Receipt For:	blover	Occupation Dir. Mark	eting/Communications	Bi-Weekly Payroll Contribution \$41.53
Primary	General specify) ▼	Aggregate	Year-to-Date ▼ 622.95	
Full Name (La Jean Tina Blat Mailing Addre		Court		Date of Receipt 1 2 2 3 2 0 0 9
City Sugar Land	1	State TX	Zip Code 77479	Transaction ID: SA11AI.30780 Amount of Each Receipt this Period
	per of contributing	C	11415	260.00
Name of Emp HCR Manor (oloyer Care, Inc.	Occupation Regional	n Director of Ops	Bi-Weekly Payroll Contrib- ution \$20.00
Receipt For: Primary Other (s	General General ▼	Aggregate	Year-to-Date ▼ 300.00	
SUBTOTAL of	Receipts This Page (optional)	1		864.89

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Kari Boice Mailing Address 40110 20th Place Ea City Makka City FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code FL 34251 C Occupation Regional Director of Ops Aggregate Year-to-Date 663.45	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) James R Bolton Mailing Address 2209 Bayward Blvd City Wilmington FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code DE 19802 C Occupation Administrator Aggregate Year-to-Date 346.05	Date of Receipt M M 30 2009 Transaction ID: SA11AI.30785 Amount of Each Receipt this Period 322.98 Bi-Weekly Payroll Contribution \$23.07
Full Name (Last, First, Middle Initial) Lori Bott Mailing Address 558 Grass Lake Road City Coldwater FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code MI 49036 C Occupation Administrator Aggregate Year-to-Date 230.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .		1027.97

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any pename and address of any political committed	person for the purpose of soliciting contributions see to solicit contributions from such committee.
\ \.	Full Name (Last, First, Middle Initial) Michelle Boyle-Haughney Mailing Address 1008 Sparrow Way City	State Zip Code	Date of Receipt 12 23 2009 Transaction ID: SA11AI.30788
	Breiningsville FEC ID number of contributing federal political committee.	PA 18031	Amount of Each Receipt this Period 174.98
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date ▼ 201.90	Bi-Weekly Payroll Contribution \$13.46
. –	Full Name (Last, First, Middle Initial) Diana Bragoli Mailing Address 6001 Waterview Circle	е	Date of Receipt 1 2 2 3 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.30789
	Phoenixville FEC ID number of contributing federal political committee.	PA 19460	Amount of Each Receipt this Period 220.48 Bi-Weekly Payroll Contrib-
	Name of Employer HCR Manor Care, Inc. Receipt For:	Occupation Director of Nursing Aggregate Year-to-Date ▼	Bi-Weekly Payroll Contrib- ution \$16.96
	Primary General Other (specify) ▼	254.40	
	Full Name (Last, First, Middle Initial) Alitta Braswell-Davis Mailing Address 10524 Runnymeade	Dulina	Date of Receipt
			08 12 2009
	City Glen Allen	State Zip Code VA 23059	Transaction ID: SA11AI.30790 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	90.05
	Name of Employer HCR Manor Care Inc	Occupation Director of Nursing	Bi-Weekly Payroll Contrib- ution \$18.01
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.16	
	SUBTOTAL of Receipts This Page (optional)		485.51

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	HCR Manor Care PAC		
	Full Name (Last, First, Middle Initial) Pamella S Britt		Date of Receipt
	Mailing Address 27135 State Rt 49		12 30 2009
	City Potomac	State Zip Code IL 61865	Transaction ID: SA11AI.30791 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	563.44
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$38.46
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 851.90	
	Full Name (Last, First, Middle Initial) Lorna M Brown		Date of Receipt
	Mailing Address 410 E. Court Street	12 30 2009	
	City State Zip Code		Transaction ID: SA11AI.30792
	Cambridge	IL 61238	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	220.00 Bi-Weekly Payroll Contrib-
	Name of Employer HCR ManorCare Inc.	Occupation Assistant Administrator	ution \$15.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Susan A Brown		Date of Receipt
	Mailing Address 212 Keefer Rd.		12 23 2009
	City Pine Crove	State Zip Code	Transaction ID: SA11AI.30793
	Pine Grove FEC ID number of contributing federal political committee.	PA 17963	Amount of Each Receipt this Period 187.59
	Name of Employer HCR ManorCare Inc	Occupation Admin Dir of Nursing Serv	Bi-Weekly Payroll Contrib- ution \$14.43
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 286.15	
[s	UBTOTAL of Receipts This Page (optional) .		971.03

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any perse name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) David Burke Mailing Address 3908 Trickling Brook I City Richmond FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc.	State Zip Code VA 23228 C Occupation	Date of Receipt M M M
Receipt For: Primary General Other (specify) ▼	Administrator Aggregate Year-to-Date ▼ 711.53	
Full Name (Last, First, Middle Initial) John C Burkhart Mailing Address 26592 Mingo Dr.		Date of Receipt
City	State Zip Code	Transaction ID: SA11AI.30796
Perrysburg FEC ID number of contributing federal political committee.	OH 43551	Amount of Each Receipt this Period 150.02 Bi-Weekly Payroll Contrib-
Name of Employer HCR ManorCare Inc. Receipt For: Primary Other (specify) ▼	Occupation Director^ Business Systems Aggregate Year-to-Date ▼ 243.10	Bi-Weekly Payroll Contribution \$11.54
Full Name (Last, First, Middle Initial) Candace Burks-McCoy		Date of Receipt
Mailing Address 6115 North Ridge Roa	ad	12 23 2009
City Et Worth	State Zip Code	Transaction ID: SA11AI.30797
Ft. Worth FEC ID number of contributing federal political committee.	TX 76135	Amount of Each Receipt this Period 325.00
Name of Employer HCR.ManorCare, Inc.	Occupation Senior Manager Clinical Services	Bi-Weekly Payroll Contribution \$25.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 555.00	
SUBTOTAL of Receipts This Page (optional) .	1	975.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16/8/ (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	The name and add	aress or any political committee to	Solicit Contributions from Such Committee.
Full Name (Last, First, Middle Initial) Charlie F Byrne			Date of Receipt
Mailing Address 4685 Rio Poco Cou	ırt		1 2 2 3 2 0 0 9
City	State	Zip Code	Transaction ID: SA11AI.30799
Naples FEC ID number of contributing federal political committee.	FL C	33109	Amount of Each Receipt this Period 598.00
Name of Employer HCR ManorCare Inc.	Occupation Sr Admir		Bi-Weekly Payroll Contrib- ution \$46.00
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 999.61	
Full Name (Last, First, Middle Initial) Shirley D Cabildo			Date of Receipt
Mailing Address 38 Bentley Court			12 23 7 2009
City Bedminster	State NJ	Zip Code 07921	Transaction ID: SA11AI.30800 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		499.98
Name of Employer HCR ManorCare Inc.	Occupation Administ		Bi-Weekly Payroll Contrib- ution \$38.46
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 684.62	
Full Name (Last, First, Middle Initial) Linda L Carrigan			Date of Receipt
Mailing Address 313 Hughes Ave			1 2 3 0 2 0 0 9
City	State	Zip Code	Transaction ID: SA11AI.30806
Lockport FEC ID number of contributing federal political committee.	C	60441	Amount of Each Receipt this Period 210.00
Name of Employer HCR Manor Care, Inc. ADON		n	Bi-Weekly Payroll Contrib- ution \$15.00
Receipt For: Primary General Other (specify) ▼	 	Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional	J		1307.98

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any peen and address of any political committee	rson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Javier Cavero Mailing Address 3077 N. Oakland Fore City Oakland Park FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code FL 33309 C Occupation Administrator Aggregate Year-to-Date 403.60	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. William Chenevert Mailing Address 620 Ashbury Drive City Perrysburg FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43551 C Occupation Vice President, Operations Suppor Aggregate Year-to-Date ▼ 4999.95	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Ms Lisa Cherry Mailing Address 1971 A Allwood Drive City Bethlehem FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code PA 18018 C Occupation Administrator Aggregate Year-to-Date 399.88	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .		2896.01

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
0	r for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC		
	Full Name (Last, First, Middle Initial) Gaye Chrobak		Date of Receipt
	Mailing Address 7840 Delaroche Ct.	Ohaka Zin Ohaka	12 23 2009
	City Jacksonville	State Zip Code FL 32210	Transaction ID: SA11AI.30812 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	204.88
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$15.76
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 236.40	
	Full Name (Last, First, Middle Initial) Karen R Clark		Date of Receipt
	Mailing Address 707 W. Burton	12 30 7 2009	
	City	State Zip Code	Transaction ID: SA11AI.30814
	Nevada	MO 64772	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$25.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
_	Full Name (Last, First, Middle Initial) Lenette A Clark		Date of Receipt
	Mailing Address 1259 Tower Court		12 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.30815
	Bourbannais	IL 60914	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	433.03
	Name of Employer HCR Manor Care, Inc	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$33.31
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 799.53	
	SUBTOTAL of Receipts This Page (optional)	1	987.91

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	for each ca	ate schedule(s) tegory of the ummary Page	FOR LINE NUMBER: PAGE 19 / 87 (check only one) X 11a
Ai or	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or e name and address of any po	used by any person olitical committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	HCR Manor Care PAC			
	Full Name (Last, First, Middle Initial) Christine M Conner			Date of Receipt
	Mailing Address 61 Panoramic Way			12 30 7 2009
	City	State Zip Code		Transaction ID: SA11AI.30817
	Walnut Creek	CA 94595		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		336.44
	Name of Employer HCR Manor Care Inc	Occupation Director of Nursing		Bi-Weekly Payroll Contrib- ution \$22.50
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary General Other (specify) ▼		572.28	
	Full Name (Last, First, Middle Initial) Ms Pamela Cox			Date of Receipt
	Mailing Address 6238 Shadowood Circ	le		12 30 7 2009
	City State Zip Code Naples FL 34112			Transaction ID: SA11AI.30820
				Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		420.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Administrator		Bi-Weekly Payroll Contrib- ution \$30.00
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary ☐ General Other (specify) ▼		480.00	
	Full Name (Last, First, Middle Initial) Lynn Creighton			Date of Receipt
	Mailing Address 200 Commonwealth I	r.		1 2 2 3 2 0 0 9
	City	State Zip Code		Transaction ID: SA11AI.30821
	Bolingbrook	IL 60440		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		218.66
	Name of Employer HCR Manor Care, Inc.	Occupation Director of Nursing		Bi-Weekly Payroll Contrib- ution \$16.82
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary General Other (specify) ▼		252.30	
	UBTOTAL of Receipts This Page (optional) .	I		975.10

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 87 (check only one) X 11a
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Z	Full Name (Last, First, Middle Initial) Johanna J Crowder Mailing Address 31524 Delaware		Date of Receipt
	City Livonia	State Zip Code MI 48150	Transaction ID: SA11AI.30822 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	390.00
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Regional Marketing Manager Aggregate Year-to-Date 450.00	Bi-Weekly Payroll Contrib- ution \$30.00
	Full Name (Last, First, Middle Initial) Ms Deborah Csaszar Mailing Address 3715 Spear St.	I.	Date of Receipt 1 2 2 3 2 0 0 9
	City	State Zip Code	Transaction ID: SA11Al.30827
	Bethlehem	PA 18020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	130.00
	Name of Employer HCR Manor Care, Inc.	Occupation Managed Care Consultant - Eastern	Bi-Weekly Payroll Contrib- ution \$10.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 294.64	
	Full Name (Last, First, Middle Initial) Karen L Davidson		Date of Receipt
	Mailing Address 612 W. Magnolia		12 23 2009
	City Pana	State Zip Code IL 62557	Transaction ID: SA11AI.30831 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	689.00
	Name of Employer HCR ManorCare Inc.	Occupation Dir^ Clinical Services	Bi-Weekly Payroll Contrib- ution \$53.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 795.00	
Г	SUBTOTAL of Receipts This Page (optional) .		1209.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16	
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	statements may not be sold or used by any persename and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Gurprit Dhaliwal Mailing Address 29934 Hazel Glen Roa City Murrieta FEC ID number of contributing federal political committee.	State Zip Code CA 92563	Date of Receipt 1 2 3 0 2 0 0 9 Transaction ID: SA11AI.30839 Amount of Each Receipt this Period 225.00	
Name of Employer HCR Manor Care Inc Receipt For: Primary General Other (specify) ▼	Occupation Director of Nursing Aggregate Year-to-Date 390.00	Bi-Weekly Payroll Contribution \$15.00	
Full Name (Last, First, Middle Initial) Janet E Diehl Mailing Address 3903 BARBARA ANN	DRIVE	Date of Receipt 1 2 3 1 2 0 0 9	
City	State Zip Code	Transaction ID: SA11AI.30840	
MONROEVILLE FEC ID number of contributing federal political committee. Name of Employer	PA 15146 C Occupation	Amount of Each Receipt this Period 606.69 Bi-Weekly Payroll Contribution \$22.47	
HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Regional Dir of Ops Aggregate Year-to-Date ▼ 943.74		
Full Name (Last, First, Middle Initial) David K Donin	I	Date of Receipt	
Mailing Address 11608 Everglade Cour	Mailing Address 11608 Everglade Court		
City North Potomac	State Zip Code MD 20878	Transaction ID: SA11AI.30843 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	471.29	
Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$31.50	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 812.95		
SUBTOTAL of Receipts This Page (optional)		1302.98	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 87 (check only one) X
Ar	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	HCR Manor Care PAC		
١.	Full Name (Last, First, Middle Initial) Kathleen A Douds		Date of Receipt
	Mailing Address 363 Strasburg Ave. City	State Zip Code	1 2 2 3 2 0 0 9 Transaction ID: SA11AI.30844
	Parkersburg	PA 19365	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	223.34
	Name of Employer HCR Manor Care, Inc.	Occupation Director of Nursing	Bi-Weekly Payroll Contrib- ution \$17.18
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 257.70	
_	Full Name (Last, First, Middle Initial) Benjamin A Duckworth		Date of Receipt
	Mailing Address 11017 Edington Road	12 30 2009	
	City	State Zip Code	Transaction ID: SA11AI.30845
	Livonia	MI 48150	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	363.00
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	Bi-Weekly Payroll Contribution \$33.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 363.00	
	Full Name (Last, First, Middle Initial) Ms Nancy Edwards	1	Date of Receipt
	Mailing Address 5726 Rolbesay Drive		12 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.30846
	Dublin FEC ID number of contributing federal political committee.	OH 43017	Amount of Each Receipt this Period 2500.03
	Name of Employer HCR.ManorCare, Inc.	Occupation General Manager, Central Division	Bi-Weekly Payroll Contrib- ution \$192.31
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.95	
	LIDTOTAL of Descirte This Desc (entired)		3086.37

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 87 (check only one) X 11a
or fo	information copied from such Reports and Sor commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)		
-	Cynthia M Eggebrecht Mailing Address 705 W. Airwood		Date of Receipt 1 2 3 1 2 0 0 9
	Dity	State Zip Code	Transaction ID: SA11AI.30847
	East Alton	IL 62024	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C	186.84
<u>1</u> 1	Name of Employer HCR Manor Care, Inc.	Occupation Director of Nursing	Weekly Payroll Contribution \$6.92
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 221.44	
	Full Name (Last, First, Middle Initial) Linda J Emmett		Date of Receipt
1	Mailing Address 10408 Meadowlark Ct	12 23 7 2009	
	City	State Zip Code	Transaction ID: SA11AI.30851
-	Bonney Lake	WA 98391	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C	260.00
<u>-</u> 1 1	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operations	Bi-Weekly Payroll Contribution \$20.00
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Christine Emrick	1	Date of Receipt
1	Mailing Address 2312 Blue Jay Dr.		12 23 YYYYY 12 23 2009
	City	State Zip Code	Transaction ID: SA11AI.30852
F	Nazareth FEC ID number of contributing ederal political committee.	PA 18064	Amount of Each Receipt this Period 650.00
_	Name of Employer HCR Manor Care, Inc. Occupation AVP Marketing Ops		Bi-Weekly Payroll Contribution \$50.00
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SII	BTOTAL of Receipts This Page (optional) .		1096.84

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24/87 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Full Name (Last, First, Middle Initial) Mr. R. Michael Ferguson			Date of Receipt
Mailing Address 2450 Underhill Roa	ad		1 2 2 3 2 0 0 9
City	State	Zip Code	Transaction ID: SA11AI.30854
Toledo FEC ID number of contributing federal political committee.	C	43615	Amount of Each Receipt this Period 999.96
Name of Employer HCR.ManorCare, Inc.	Occupation Vice Pres	n sident, Purchasing	Bi-Weekly Payroll Contrib- ution \$76.92
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 999.96	
Full Name (Last, First, Middle Initial) Suzanne L Fisher			Date of Receipt
Mailing Address 1504 Old Bernville Road			1 2 2 3 2 0 0 9
City State Zip Code Leesport PA 19533			Transaction ID: SA11AI.30856 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13355	130.00
Name of Employer HCR Manor Care, Inc.	Occupation	rector of Nursing Services	Bi-Weekly Payroll Contrib- ution \$10.00
Receipt For: Primary General Other (specify) ▼	'	Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Karen L Forrest			Date of Receipt
Mailing Address 3115 Wynstone Dr			12 23 2009
City	State	Zip Code	Transaction ID: SA11AI.30860
Quincy FEC ID number of contributing federal political committee.	C	62305	Amount of Each Receipt this Period 804.96
Name of Employer HCR ManorCare Inc.	Occupation Regional	Director of Operation	Bi-Weekly Payroll Contrib- ution \$61.92
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1583.74	
SUBTOTAL of Receipts This Page (options	al)		1934.92

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 87 (check only one) X 11a
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
∠ A .	Full Name (Last, First, Middle Initial) Jamie Fox Mailing Address 705A Allentown Rd		Date of Receipt 1 2 2 3 2 0 0 9
	City Sellersville	State Zip Code PA 18960	Transaction ID: SA11AI.30861
	FEC ID number of contributing federal political committee.	C 16900	Amount of Each Receipt this Period 281.19
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date ▼ 465.85	Bi-Weekly Payroll Contribution \$21.63
3.	Full Name (Last, First, Middle Initial) George Frill Mailing Address 2006 Hale Ct		Date of Receipt 1 2 2 3 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.30863
	Wyomiseing FEC ID number of contributing federal political committee.	PA 19610	Amount of Each Receipt this Period 303.68 Bi-Weekly Payroll Contrib-
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Administrator - Laureldale Aggregate Year-to-Date ▼ 532.72	Bi-Weekly Payroll Contribution \$23.36
_ ;.	Full Name (Last, First, Middle Initial) Carole E Galea Mailing Address 6211 Hellner		Date of Receipt
	City	State Zip Code	1 2 0 2 2 0 0 9 Transaction ID: SA11AI.30865
	Ann Arbor	MI 48105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	256.20
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$21.35
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 298.90	
	SUBTOTAL of Receipts This Page (optional)		841.07

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 87 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) John F Gallick Mailing Address 392 Castle Crest Roa City Alamo FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code CA 94507 C Occupation Administrator Aggregate Year-to-Date 220.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Ms. Sally Gates Mailing Address 2011 20th Lane City Palm Beach Gardens FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code FL 33418 C Occupation Regional Director of Operations Aggregate Year-to-Date 285.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Mr. Gary T. Geise Mailing Address 825 Ashbury Dr. City Perrysburg FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43551 C Occupation Director of Reimbursement Aggregate Year-to-Date 946.20	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		921.03

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) HCR Manor Care PAC	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Jennifer R Getgen Mailing Address 142 Losch Lane Ap City Jersey Shore FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code PA 17740 C Occupation Administrator Aggregate Year-to-Date 225.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Marty Grabijas Mailing Address 2682 Ravine Side N City Howell FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare,Inc. Receipt For: Primary General Other (specify)	State Zip Code MI 48843 C Occupation Director of Market Development Aggregate Year-to-Date 657.60	Date of Receipt M M / 23 / 2009 Transaction ID: SA11AI.30880 Amount of Each Receipt this Period 427.44 Bi-Weekly Payroll Contribution \$32.88
Full Name (Last, First, Middle Initial) James Grady Mailing Address 1311 Old Taylor Tra City Goshen FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care Inc Receipt For: Primary General Other (specify)	State Zip Code KY 40026 C Occupation Regional Director of Operations Aggregate Year-to-Date 1132.07	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional	ıl)	1346.93

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
An	y information copied from such Reports and Sta for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. John Graham Mailing Address 3000 Riva Ridge Rd City Toledo FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43615 C Occupation VP/GM - Heartland Hospice Aggregate Year-to-Date ▼ 4408.32	Date of Receipt M
3.	Full Name (Last, First, Middle Initial) Ruth G Graziano Mailing Address 503 Elk Mills Road City Oxford FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code PA 19363 C Occupation Regional Director of Operation Aggregate Year-to-Date 1200.00	Date of Receipt M M
	Full Name (Last, First, Middle Initial) Brian Gross Mailing Address 1392 Lucerne Dr City Crystal Lake FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60014 C Occupation Sr Administrator Aggregate Year-to-Date 225.00	Date of Receipt M M
s	UBTOTAL of Receipts This Page (optional)		3250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 87 (check only one) X
A	ny information copied from such Reports and some for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ a .	Full Name (Last, First, Middle Initial) Melissa M. Groves Mailing Address Rt. 1 Box 404		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City <u>Kingwood</u>	State Zip Code WV 26537	Transaction ID: SA11AI.30886 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	63.55
	Name of Employer HCR.ManorCare, Inc.	Occupation Administrator Aggregate Year-to-Date	Bi-Weekly Payroll Contrib- ution \$12.71
	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	203.36	
	Stephen L Guillard Mailing Address 217 Garden St.		Date of Receipt 1 2 2 3 2 0 0 9
	City Needham	State Zip Code MA 02492	Transaction ID: SA11AI.30888
	FEC ID number of contributing federal political committee.	MA 02492	Amount of Each Receipt this Period 2500.09 Bi Weekly Payrell Contrib
	Name of Employer HCR ManorCare Inc.	Occupation Executive Vice President	Bi-Weekly Payroll Contrib- ution \$192.31
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4423.13	
	Full Name (Last, First, Middle Initial) Jill L Hale	1	Date of Receipt
	Mailing Address 366 Burlington Rd		12 23 2009
	City Jackson	State Zip Code OH 45640	Transaction ID: SA11AI.30889 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	260.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$20.00
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Γ,	SUBTOTAL of Receipts This Page (optional) .		2823.64

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any person e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Karen Harris Mailing Address 8250 SW 8th St City North Lauderdale FEC ID number of contributing federal political committee.	State Zip Code FL 33068	Date of Receipt M M D D Y Y Y Y Y Y Y Y
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	Occupation Assistant Administrator Aggregate Year-to-Date 685.88	Bi-Weekly Payroll Contrib- ution \$26.68
 3.	Full Name (Last, First, Middle Initial) Mr. Alan Hash Mailing Address 9496South Dunbar Ci City	rcle State Zip Code	Date of Receipt 12 23 2009 Transaction ID: SA11AI.30894
	South Jordan FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc.	UT 84095 C Occupation	Amount of Each Receipt this Period 650.00 Bi-Weekly Payroll Contribution \$50.00
	Receipt For: Primary General Other (specify)	Regional Director - Western Division 5 Aggregate Year-to-Date ▼ 930.00	<u>i</u>
).	Full Name (Last, First, Middle Initial) Kevin C Henricks Mailing Address 23 Chicago St. Apt.G	•	Date of Receipt 1 2 2 3 2 0 0 9
	City Plainfield FEC ID number of contributing federal political committee.	State Zip Code IL 60544	Transaction ID: SA11AI.30897 Amount of Each Receipt this Period 624.00
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Regional Director of Operation Aggregate Year-to-Date 1014.00	Bi-Weekly Payroll Contrib- ution \$48.00
Ę	SUBTOTAL of Receipts This Page (optional)		1620.84

SCHEDULE A (FEC Form 3X FEMIZED RECEIPTS	for each of	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 31 / 87 (check only one) X 11a 11b 11c 12 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold ne name and address of any p	or used by any person political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Donnett H Henry Mailing Address 7531 Plantation			Date of Receipt
City	State Zip Cod	de	1 2 2 3 2 0 0 9 Transaction ID: SA11AI.30898
Mirimar FEC ID number of contributing federal political committee.	FL 33023	• • •	Amount of Each Receipt this Period 225.94
Name of Employer HCR Manor Care, Inc.	Occupation Director of Nursing		Bi-Weekly Payroll Contribution \$17.38
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	347.60	
Full Name (Last, First, Middle Initial) Mary I Herman Mailing Address 418 Highland Ave. F	R#5		Date of Receipt
City	State Zip Cod	le	12 30 2009 Transaction ID: SA11AI.30899
Clarks Summit	PA 18411		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		407.28
Name of Employer HCR ManorCare Inc.	Occupation Administrator		Bi-Weekly Payroll Contrib- ution \$28.13
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	e ▼ 658.03	
Full Name (Last, First, Middle Initial) Elizabeth B. Hill	1		Date of Receipt
Mailing Address 1285 Sunhill Drive			12 30 7 2009
City Lawrenceville	State Zip Cod GA 30043	de	Transaction ID: SA11AI.30901 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		178.69
Name of Employer HCR.ManorCare, Inc.	Occupation Administrator		Bi-Weekly Payroll Contrib- ution \$15.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	e ▼ 379.52	
SUBTOTAL of Receipts This Page (optional)		.	811.91

	EHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or f	r information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any peen ame and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	HCR Manor Care PAC		
	Full Name (Last, First, Middle Initial) Scott Hochstadt		Date of Receipt
-	Mailing Address 24106 Nottingham Av		12 23 2009
	City Plainfield	State Zip Code IL 60585	Transaction ID: SA11AI.30903
-	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 277.16
Ī	Name of Employer HCR Manor Care, Inc.	Occupation Assistant Administrator	Bi-Weekly Payroll Contrib- ution \$21.32
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 319.80	
•	Full Name (Last, First, Middle Initial) Kara L Hoernemann		Date of Receipt
	Mailing Address 352 W. Salem St.		12 23 2009
	City	State Zip Code	Transaction ID: SA11AI.30904
	Clayton	OH 45315	Amount of Each Receipt this Period
1	FEC ID number of contributing federal political committee.	C	260.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$20.00
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Mr. Paul E. Hoffman		Date of Receipt
Ì	Mailing Address 4829 Rhone Drive		12 23 7 2009
	City Maumee	State Zip Code OH 43537	Transaction ID: SA11AI.30905 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	316.29
Ī	Name of Employer HCR Manor Care, Inc.	Occupation Director of Ops Support - Midstates	Bi-Weekly Payroll Contrib- ution \$24.33
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 528.75	
SU	IBTOTAL of Receipts This Page (optional)	1	853.45

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33/87 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may	not be sold or used by any personal research any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	y the name and add	areas or any political committee to	y solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Rodger J Hogan			Date of Receipt
Mailing Address 101 Mercury Way			M M / D D / Y Y Y Y Y Y Y 1 2 3 0 2 0 0 9
City	State	Zip Code	Transaction ID: SA11AI.30906
Pleasant Hill FEC ID number of contributing federal political committee.	CA	94523	Amount of Each Receipt this Period 385.40
Name of Employer HCR Manor Care Inc	Occupation Administ		Bi-Weekly Payroll Contrib- ution \$25.10
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 697.10	
Full Name (Last, First, Middle Initial) Sharon R Holmes	I		Date of Receipt
Mailing Address 3207 N. 27th St.			12 23 2009
City Tacoma	State WA	Zip Code 98407	Transaction ID: SA11AI.30907 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00107	264.94
Name of Employer HCR Manor Care, Inc.	Occupation Administ	n rator in Training	Bi-Weekly Payroll Contrib- ution \$20.38
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 305.70]
Full Name (Last, First, Middle Initial) Lynn M Hood	I		Date of Receipt
Mailing Address 15415 Meadow Wo	ood Dr		12 23 2009
City	State FL	Zip Code	Transaction ID: SA11AI.30910
Wellington FEC ID number of contributing federal political committee.	C	33414	Amount of Each Receipt this Period 1170.00
Name of Employer HCR ManorCare Inc.	Occupation Asst Gen		Bi-Weekly Payroll Contrib- ution \$90.00
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 1260.00	
SUBTOTAL of Receipts This Page (optional	50		1820.34

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 87 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Kathryn Hoops Mailing Address 24708 McCutcheny	ille Boad	Date of Receipt
City	State Zip Code	1 2 2 3 2 0 0 9 Transaction ID: SA11AI.30911
Perrysburg	OH 43551	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1300.00
Name of Employer HCR.ManorCare, Inc.	Occupation VP of Tax	Bi-Weekly Payroll Contribution \$100.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2653.92	
Full Name (Last, First, Middle Initial) Mr. John Huber		Date of Receipt
Mailing Address 26448 Carronade D		10 28 7 2009
City	State Zip Code	Transaction ID: SA11AI.30913
Perrysburg	OH 43551	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	450.00
Name of Employer HCR.ManorCare, Inc.	Occupation Regional Director of Operations	Bi-Weekly Payroll Contrib- ution \$50.00
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1100.00	
Full Name (Last, First, Middle Initial) Patricia Hudson		Date of Receipt
Mailing Address 1333 Cromly Ct.		12 31 7 2009
City <u>Maumee</u>	State Zip Code OH 43537	Transaction ID: SA11AI.30914 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	581.31
Name of Employer HCR Manor Care, Inc.	Occupation Reg. Director of 4H	Weekly Payroll Contribution \$21.53
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 688.96	
SUBTOTAL of Receipts This Page (optiona)	2331.31

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Kathleen Hutchison Mailing Address 2692 Elton Circle City Lambertville FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code MI 48144 C Occupation Director Human Resources Ops Sup Aggregate Year-to-Date 465.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Timothy J Irwin Mailing Address 1497 Calloway Ct. City Howell FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code MI 48843 C Occupation Sr Administrator Aggregate Year-to-Date 692.25	Date of Receipt M
Full Name (Last, First, Middle Initial) Frank A Jannazo Mailing Address 3466 Country Farms City Oregon FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43616 C Occupation Dir^ Accounts Receivable Aggregate Year-to-Date 630.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .		1034.95

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36/8/ (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	not be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	g the name and add	less of any pointed committee to	y solicit contained one from soon continuees.
Full Name (Last, First, Middle Initial) Gina Elizabeth Jennings			Date of Receipt
Mailing Address 7 Eva Court			1 2 0 9 2 0 0 9
City	State	Zip Code	Transaction ID: SA11AI.30920
Baltimore FEC ID number of contributing federal political committee.	C	21220	Amount of Each Receipt this Period 195.60
Name of Employer HCR Manor Care, Inc	Occupation ADNS		Bi-Weekly Payroll Contrib- ution \$19.56
Receipt For: Primary General Other (specify) ▼	11.12.12	Year-to-Date ▼ 348.12	
Full Name (Last, First, Middle Initial) Ms Diane Johnson			Date of Receipt
Mailing Address 206 Ruth Road			12 23 7 2009
City Fleetwood	State PA	Zip Code 19522	Transaction ID: SA11AI.30922 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	TOOLE	669.89
Name of Employer HCR.ManorCare, Inc.	Occupation Regional	Director of Operations	Bi-Weekly Payroll Contrib- ution \$51.53
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 772.95	
Full Name (Last, First, Middle Initial) Nancy E Johnson			Date of Receipt
Mailing Address 4266 Shire Landin	g		12 23 2009
City Hillard	State OH	Zip Code 43026	Transaction ID: SA11AI.30924
FEC ID number of contributing federal political committee.	С	43020	Amount of Each Receipt this Period 682.24
Name of Employer HCR Manor Care, Inc.	Occupation Regional	Director of Ops	Bi-Weekly Payroll Contrib- ution \$52.48
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
SUBTOTAL of Receipts This Page (option			1547.73

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	HCR Manor Care PAC		
	Full Name (Last, First, Middle Initial) Nicholas B Johnson		Date of Receipt
	Mailing Address 8402 Lynn Circle		1 2 3 0 Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.30925
	Pasadena	MD 21122	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	151.19
	Name of Employer HCR Manor Care, Inc.	Occupation Admission Director	Bi-Weekly Payroll Contrib- ution \$10.10
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	200.14	
_	Full Name (Last, First, Middle Initial) Robert G Julius		Date of Receipt
	Mailing Address P O Box 538 Int. Train/Ctrl SVC 7		12 23 2009
	City	State Zip Code	Transaction ID: SA11AI.30927
	Sylvania Sylvania	OH 43560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	281.19
	Name of Employer HCR Manor Care, Inc.	Occupation Mgr. Business Office Process Dev.	Bi-Weekly Payroll Contrib- ution \$21.63
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	432.60	
	Full Name (Last, First, Middle Initial) Elizabeth M Kaczor		Date of Receipt
	Mailing Address 1689 Rauch Rd		12 23 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.30928
	Temperance	MI 48182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	499.98
	Name of Employer HCR ManorCare Inc.	Occupation AVP HR Operations	Bi-Weekly Payroll Contribution \$38.46
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	999.96	
			932.36

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for cor	mation copied from such Reports and Stamercial purposes, other than using the OF COMMITTEE (In Full)	itatements may name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
HCR	Manor Care PAC			
	ame (Last, First, Middle Initial) M Kalas			Date of Receipt
	g Address 10839 Cambria Ct.			12 23 7 2009
City Hunt	O.V.	State IL	Zip Code	Transaction ID: SA11AI.30929
FEC I	D number of contributing I political committee.	C	60142	Amount of Each Receipt this Period 237.38
	of Employer Manor Care, Inc.	Occupation		Bi-Weekly Payroll Contrib- ution \$18.26
	ot For: Primary General Other (specify) •	Aggregate	Year-to-Date ▼ 255.64	
	ame (Last, First, Middle Initial) athy Karr			Date of Receipt
Mailin	g Address 4430 Woodfield Drive			12 23 2009
City		State	Zip Code	Transaction ID: SA11AI.30932
	ndorf	<u>IA</u>	52722	Amount of Each Receipt this Period
	D number of contributing Il political committee.	С		195.00
Name HCR	of Employer Manor Care Inc.	Occupation Senior Ac	lministrator	Bi-Weekly Payroll Contrib- ution \$15.00
	ot For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 372.00	
	ame (Last, First, Middle Initial) ley L Kasper			Date of Receipt
Mailin	g Address 2750 CR 110			12 30 2009
City	atowa	State TX	Zip Code	Transaction ID: SA11AI.30933
FEC I	gtown D number of contributing I political committee.	C	78626	Amount of Each Receipt this Period 403.76
Name HCR	of Employer Manor Care, Inc.	Occupation Administr		Bi-Weekly Payroll Contrib- ution \$28.84
	ot For: Primary General Other (specify) ▼	, '	Year-to-Date ▼ 461.44	
SUBTO	FAL of Receipts This Page (optional)	<u> </u>		836.14

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the (crieck only only)
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used name and address of any political of	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Anthony J. Keelin Mailing Address 2208 26th Avenue Sou	h	Date of Receipt 1 2 2 3 2 0 0 9
	City Fargo	State Zip Code ND 58103	Transaction ID: SA11AI.30936 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	Cooperation	390.00 Bi-Weekly Payroll Contrib-
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Administrator - Fargo Aggregate Year-to-Date	ution \$30.00 ²
3.	Full Name (Last, First, Middle Initial) Carol M Keiser Mailing Address 132 Regent St.		Date of Receipt
	City	State Zip Code	Transaction ID: SA11AI.30937
	Wilkes Barre	PA 18702	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.79 Bi-Weekly Payroll Contrib-
	Name of Employer HCR Manor Care, Inc.	Occupation Director of Nursing	Bi-Weekly Payroll Contrib- ution \$14.83
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	222.45
	Full Name (Last, First, Middle Initial) Dan Kight Mailing Address 2013 Orchard Rd		Date of Receipt
			12 23 2009
	City Toledo	State Zip Code OH 43606	Transaction ID: SA11AI.30940 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	499.98
	Name of Employer HCR ManorCare Inc.	Occupation Mgr^ Pharmacy Ops Sprt	Bi-Weekly Payroll Contrib- ution \$38.46
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	76.90
	SUBTOTAL of Receipts This Page (optional)		1082.77

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may be name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	Full Name (Last, First, Middle Initial)			
	Vivian Kiraly Mailing Address 103 Kama Lane			Date of Receipt 1 2 2 3 2 0 0 9
	City	State	Zip Code	Transaction ID: SA11Al.30941
	Cross Lanes	WV	25313	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administ		Bi-Weekly Payroll Contrib- ution \$25.00
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	
_	Full Name (Last, First, Middle Initial) Andrew Koha			Date of Receipt
	Mailing Address 7620 Isaac Drive			12 23 7 2009
	City	State	Zip Code	Transaction ID: SA11AI.30944
	Middleburg Heights	OH	44130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer HCR Manor Care, Inc.	Occupation RDO - Co		Bi-Weekly Payroll Contribution \$50.00
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1200.00	
_	Full Name (Last, First, Middle Initial) Michelle L Kreps			Date of Receipt
	Mailing Address 1560 Beecher Lane			12 30 YYYYY 12 30 2009
	City	State	Zip Code	Transaction ID: SA11AI.30947
	Orange Park FEC ID number of contributing federal political committee.	C	32073	Amount of Each Receipt this Period 280.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administ		Bi-Weekly Payroll Contrib- ution \$20.00
	Receipt For: Primary General Other (specify) ▼	'	Year-to-Date ▼ 320.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		1255.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any perename and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Betty Kutner Mailing Address 3006 Wild Run Road		Date of Receipt
	City Pennsburg	State Zip Code PA 18073	Transaction ID: SA11AI.30948 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	130.00
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	Occupation Administrator - Easton Aggregate Year-to-Date 260.00	Bi-Weekly Payroll Contribution \$10.00
	Full Name (Last, First, Middle Initial) Amy LaFleur Mailing Address 207 S. Ann Arbor St.		Date of Receipt
	City	State Zip Code	1 2 2 3 2 0 0 9 Transaction ID: SA11AI.30949
	Saline	MI 48176	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	249.99
	Name of Employer HCR. Manor Care, Inc	Occupation Regional Director of Operations	Bi-Weekly Payroll Contribution \$19.23
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 288.45	
	Full Name (Last, First, Middle Initial) Mr. David Lanning		Date of Receipt
	Mailing Address 806 Copley Lane		08 19 2009
	City Silver Spring	State Zip Code MD 20904	Transaction ID: SA11AI.30951 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	390.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Vice President, Development	Bi-Weekly Payroll Contrib- ution \$97.50
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1657.50	
	SUBTOTAL of Receipts This Page (optional)	1	769.99

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	HCR Manor Care PAC		
	Full Name (Last, First, Middle Initial) Michael Lavin		Date of Receipt
	Mailing Address 205 Foxmanor Lane		12 23 2009
	City Glen Burnie	State Zip Code MD 21061	Transaction ID: SA11AI.30952
	FEC ID number of contributing federal political committee.	MD 21061	Amount of Each Receipt this Period 229.84
	Name of Employer HCR Manor Care, Inc.	Occupation AIT	Bi-Weekly Payroll Contrib- ution \$17.68
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 508.10	
	Full Name (Last, First, Middle Initial) Brandon P Lesniak Mailing Address 2141 Willow Beach	I.	Date of Receipt
	Walling Address 2141 Willow Beach		12 23 2009
	City Keego Harbor	State Zip Code MI 48320	Transaction ID: SA11AI.30956
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 207.48
	Name of Employer HCR Manor Care, LLC	Occupation Div Director Ops Support	Bi-Weekly Payroll Contribution \$15.96
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 239.40	
_	Full Name (Last, First, Middle Initial) Joseph D Lingenfelter		Date of Receipt
	Mailing Address 5108 Kingswood		1 1 1 9 2 0 0 9
	City	State Zip Code IN 46033	Transaction ID: SA11AI.30957
	Carmel FEC ID number of contributing federal political committee.	IN 46033	Amount of Each Receipt this Period 527.94
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator 4H	Bi-Weekly Payroll Contribution \$25.14
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 653.64	
	SUBTOTAL of Receipts This Page (optional) .		965.26

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Diane Lube Mailing Address 1040 Pinewood Drive City Downers Grove FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc.	State Zip Code IL 60516 C Occupation	Date of Receipt M M
_	Receipt For: Primary General Other (specify)	Administrator Aggregate Year-to-Date ▼ 390.00	
В.	Full Name (Last, First, Middle Initial) Carrie Lund Mailing Address 14802 Dunston Place City	State Zip Code	Date of Receipt M
	Tampa FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc.	C Occupation Sr. Administrator - Palm Harbor	Amount of Each Receipt this Period 598.00 Bi-Weekly Payroll Contribution \$46.00
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1196.00	
с.	Full Name (Last, First, Middle Initial) Margo L Lutton Mailing Address 6251 Crystal Springs C		Date of Receipt 1 2 1 6 2 0 0 9
	City Avon FEC ID number of contributing federal political committee.	State Zip Code IN 46123	Transaction ID: SA11AI.30964 Amount of Each Receipt this Period 325.00
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date 375.00	Bi-Weekly Payroll Contrib- ution \$25.00
Γ	SUBTOTAL of Receipts This Page (optional)		1148.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 87 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Gretchen W Mangone Mailing Address 5234 Reddington City Dublin FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43017 C Occupation Administrator Aggregate Year-to-Date 550.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Sephanie M Marcotullio Mailing Address 49895 Waterstone Est City Northville FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	ates Circle State Zip Code MI 48168 C Occupation Administrator Aggregate Year-to-Date ▼	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Anita M Martinez Mailing Address 909 Gainesway Court City Florissant FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code MO 63034 C Occupation Administrator Aggregate Year-to-Date 357.68	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		712.16

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and S	Use separate schedule(s) for each category of the Detailed Summary Page tatements may not be sold or used by any pers	FOR LINE NUMBER: PAGE 45 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17 con for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	name and address of any political committee to	o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Nancy F Mason Mailing Address 56 Holden Dr City Martinsburg FEC ID number of contributing federal political committee.	State Zip Code WV 25401	Date of Receipt 1 2 3 0 2 0 0 9 Transaction ID: SA11AI.30980 Amount of Each Receipt this Period 176.56
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 274.64	Bi-Weekly Payroll Contrib- ution \$11.54
В.	Full Name (Last, First, Middle Initial) Frances Mastel Mailing Address 1807 Derian Drive		Date of Receipt 1 2 2 3 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.30982
	Aberdeen	SD 57401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	195.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$15.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.50	
- C.	Full Name (Last, First, Middle Initial) Ms. Janet Mastrangelo (Howells) Mailing Address 266 Crossing Creek No.	Date of Receipt 1 2 2 3 2 0 0 9	
	City	State Zip Code	Transaction ID: SA11AI.30983
	Gahanna FEC ID number of contributing federal political committee.	OH 43230	Amount of Each Receipt this Period 999.96
	Name of Employer HCR.ManorCare, Inc.	Occupation Assistant Vice President of Rehab	Bi-Weekly Payroll Contrib- ution \$76.92
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1868.40	
Γ	SUBTOTAL of Receipts This Page (optional)		1371.52

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate s for each categ Detailed Sumr	gory of the
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or us e name and address of any politic	sed by any person for the purpose of soliciting contributions cal committee to solicit contributions from such committee.
	HCR Manor Care PAC		
۷.	Full Name (Last, First, Middle Initial) Jill Matelan		Date of Receipt
	Mailing Address 700 Golden Drive		12 23 2009
	City	State Zip Code	Transaction ID: SA11AI.30984
	Blandon	PA 19510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	352.43
	Name of Employer HCR Manor Care, Inc	Occupation Administrator - Sinking	Bi-Weekly Payroll Contrib- ution \$27.11
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	406.65
_ 3.	Full Name (Last, First, Middle Initial) William J McDaniel II		Date of Receipt
	Mailing Address 7420 Nightingale Dr.	12 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: SA11AI.30988
	Holland	OH 45328	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	Bi Wookly Payroll Contrib
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$24.51
	Receipt For:	Aggregate Year-to-Date ▼	,
	Primary General Other (specify) ▼		367.65
. –	Full Name (Last, First, Middle Initial) Murry J Mercier		Date of Receipt
	Mailing Address 7110 Oak Bluff Lane		12 23 YYYY 12 23 2009
	City	State Zip Code	Transaction ID: SA11AI.30993
	Maumee	OH 43537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	Pi Wookly Poyrall Contrib
	Name of Employer HCR ManorCare Inc.	Occupation VP Dir of Information Se	Bi-Weekly Payroll Contrib- ution \$192.31
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	5000.00
Γ		1	3171.03

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) HCR Manor Care PAC	nd Statements may not be sold or used by any person to the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Stacy H Mesaros Mailing Address 1304 234th PI City Des Moines FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General	State Zip Code WA 98198 C Occupation Administrator Aggregate Year-to-Date 320.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) William Milianes Mailing Address 169 Sheridan Ave. City Ho Ho Kus FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	State Zip Code NJ 07423 C Occupation Executive Director Aggregate Year-to-Date 433.88	Date of Receipt 1 2 3 0 2 0 0 9 Transaction ID: SA11AI.30997 Amount of Each Receipt this Period 306.13 Bi-Weekly Payroll Contribution \$20.63
Full Name (Last, First, Middle Initial) Scott Miller Mailing Address 198 Old Mill Drive City Langhorne FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code PA 19047 C Occupation Sr Administrator Aggregate Year-to-Date 744.30	Date of Receipt 1 2 2 3 2 0 0 9 Transaction ID: SA11AI.30998 Amount of Each Receipt this Period 645.06 Bi-Weekly Payroll Contribution \$46.92
SUBTOTAL of Receipts This Page (option	al)	1231.19

	EDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	e (check only one)
or for o	commercial purposes, other than using the ME OF COMMITTEE (In Full)	tatements may not be sold or used by an name and address of any political comm	y person for the purpose of soliciting contributions littee to solicit contributions from such committee.
/ Ful	CR Manor Care PAC I Name (Last, First, Middle Initial) Susan Morey		Date of Receipt
Mai — City	iling Address 700 Hunters Road	State Zip Code	12 23 2009
-	y ohnton	PA 19540	Transaction ID: SA11AI.31005 Amount of Each Receipt this Period
FE	C ID number of contributing eral political committee.	C	715.00
Nar HC	me of Employer R.ManorCare, Inc.	Occupation Regional Director of Operations	Bi-Weekly Payroll Contribution \$55.00
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 825.0	
Mai	Name (Last, First, Middle Initial) rtha E Mosley		Date of Receipt
Mai	iling Address 2116 11th St.		12 30 2009
City		State Zip Code	Transaction ID: SA11AI.31006
	oona	PA 16601	Amount of Each Receipt this Period
fed	C ID number of contributing eral political committee.	C	367.50
Nar HC	me of Employer R Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$26.25
Rec	ceipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 420.0	00
	l Name (Last, First, Middle Initial) porah T Mullane		Date of Receipt
Mai	iling Address 808 Latshaw Rd.		12 23 2009
City		State Zip Code	Transaction ID: SA11AI.31008
FE	ring City C ID number of contributing eral political committee.	PA 19475	Amount of Each Receipt this Period 197.60
Nar HC	me of Employer R Manor Care, Inc.	Occupation Director of Nursing	Bi-Weekly Payroll Contribution \$15.20
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 228.0	00
SUBT	OTAL of Receipts This Page (optional)		1280.10

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) HCR Manor Care PAC Full Name (Last, First, Middle Initial) Melinda K Multier Maling Address 31582 Corte Encinas City Temecula CA 92592 FEC 10 number of contributing feeder alpolistical committee. Vame of Employer HCR Manor Care in Addinistrator Receipt For: Other (specify) ▼ State Zip Code Transaction ID: SA11Al.31019 Bi-Weekly Payroll Contribution \$20.00 City Transaction ID: SA11Al.31019 Date of Receipt Manual of Each Receipt this Period FEC 10 number of contributing	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 87 (check only one) X
Mailing Address 31682 Corte Encinas City State Zip Code Temecula CA 92592 FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care Inc. City State Zip Code Transaction ID: SA11Al.31009 Administrator Administrator Receipt For: Politinary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kowin Murphy Mailing Address 6751 Hampsford Circle City State Zip Code Toledo OH 43617 FEC ID number of contributing federal political committee. C State Zip Code Toledo OH 43617 FEC ID number of contributing federal political committee. C State Zip Code Toledo OH 43617 FEC ID number of contributing federal political committee. C State Zip Code Transaction ID: SA11Al.31011 Amount of Each Receipt this Period Transaction ID: SA11Al.31011 Transaction ID: SA11Al.31011 To S20.00 Date of Receipt Transaction ID: SA11Al.31011 To S20.00 Transaction ID: SA11Al.31011 Date of Receipt Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31011 Transaction ID: SA11Al.31011 To S20.00 Date of Receipt Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31011 Transaction ID: SA11Al.31011 Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012 Amount of Each Receipt this Period Transaction ID: SA11Al.31012	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Name of Employer Mailing Address 2379 Schaffer Road City State Zip Code Transaction ID: SA11Al.31011	Melinda K Muller Mailing Address 31682 Corte Encinas City Temecula FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care Inc Receipt For: Primary General	CA 92592 C Occupation Administrator Aggregate Year-to-Date 520.00	Transaction ID: SA11AI.31009 Amount of Each Receipt this Period 300.00 Bi-Weekly Payroll Contrib-
Terrance Murphy Mailing Address 2379 Schaffer Road City State Zip Code Pottstown PA 19464 FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1057.43	Kevin Murphy Mailing Address 6751 Hampsford Circle City Toledo FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General	State Zip Code OH 43617 C Occupation Regional Dir of Ops Aggregate Year-to-Date	Transaction ID: SA11AI.31011 Amount of Each Receipt this Period 405.00
SUBTOTAL of Receipts This Page (optional)	Terrance Murphy Mailing Address 2379 Schaffer Road City Pottstown FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General	PA 19464 C Occupation Administrator Aggregate Year-to-Date	Transaction ID: SA11AI.31012 Amount of Each Receipt this Period 352.43
	SUBTOTAL of Receipts This Page (optional)		1057.43

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
4	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC		
. ∠ \.	Full Name (Last, First, Middle Initial) Mr. Tom Myers		Date of Receipt
	Mailing Address 29378 Lindsay Dr.		12 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.31014
	Perrysburg	OH 43551	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	325.00
	Name of Employer HCR Manor Care, Inc.	Occupation Director of Ops Support - Central	Bi-Weekly Payroll Contrib- ution \$25.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_ 3.	Full Name (Last, First, Middle Initial) David K Nees		Date of Receipt
	Mailing Address 5315 Rymoor Drive		12 23 2009
	City	State Zip Code	Transaction ID: SA11AI.31015
	<u>Sylvania</u>	OH 43560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1169.74
	Name of Employer HCR. Manor Care, Inc	Occupation Associate General Counsel	Bi-Weekly Payroll Contrib- ution \$89.98
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1349.70	
_ :	Full Name (Last, First, Middle Initial) Linda Neumann		Date of Receipt
	Mailing Address 28 Roslyn Road		12 23 2009
	City	State Zip Code	Transaction ID: SA11AI.31016
	Grosse Pointe Shor	MI 48236	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1424.93
	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operation	Bi-Weekly Payroll Contrib- ution \$109.61
	Receipt For: Primary General	Aggregate Year-to-Date ▼ 2393.19	7
_	Other (specify) ▼		1
	SUBTOTAL of Receipts This Page (optional)		2919.67

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 87 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kevin O'Connor Mailing Address 5814 Sherwood Circle City Monclova FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43542 C Occupation Legal Counsel Aggregate Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Nashika T O'Gilvie Mailing Address 1823 N. Congress Ave City West Palm Beach FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code FL 33401 C Occupation Administrator Aggregate Year-to-Date 207.75	Date of Receipt M
Full Name (Last, First, Middle Initial) Ms Leslie Ohm Mailing Address 12331 South 71st Aver City Palos Heights FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60463 C Occupation Regional Director of Operations Aggregate Year-to-Date 1211.55	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1010.02

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any personame and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Ms. Annette Orlowski Mailing Address 669 Highway 60 City Cedarburg FEC ID number of contributing federal political committee.	State Zip Code WI 53012	Date of Receipt M M M
	Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Director, Clinical Services Aggregate Year-to-Date 1876.40	Bi-Weekly Payroll Contribution \$93.82
 3.	Full Name (Last, First, Middle Initial) Ann E Otley Mailing Address 333 W Wooster St City	State Zip Code	Date of Receipt M M D D 7 Y Y Y Y Y Y Y Y Y
	Bowling Green FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For:	OH 43402 C Occupation Director of Corporate Benefits	Amount of Each Receipt this Period 520.00 Bi-Weekly Payroll Contribution \$40.00
_	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 1040.00	
	Mr. David Parker Mailing Address 2154 Tremont Road City State Zip Code		Date of Receipt M M D D D Y Y Y Y Y Y Y
	Columbus FEC ID number of contributing federal political committee.	OH 43212	Amount of Each Receipt this Period 1612.52
	Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify) ▼	Occupation VP Assistant General Manager Aggregate Year-to-Date 2322.60	Bi-Weekly Payroll Contribution \$124.04
	SUBTOTAL of Receipts This Page (optional)	<u> </u>	3352.18

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 53 / 87 (check only one) X 11a
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be name and address o	e sold or used by any perso f any political committee to	on for the purpose of soliciting contributions
\ \.	Full Name (Last, First, Middle Initial) Richard A Parr II Mailing Address 2253 Gray Fox Court			Date of Receipt
	City Ann Arbor		p Code 8103	Transaction ID: SA11AI.31029 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1	2496.00 Bi-Weekly Payroll Contrib-
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify) ▼	Occupation VP - General C Aggregate Year-t	Counsel & Secretary o-Date ▼ 4992.00	ution \$192.00
3.	Full Name (Last, First, Middle Initial) Deborah A Parziale Mailing Address 8850 Little Creek Road			Date of Receipt 1 2 3 0 2 0 0 9
	City	State Z	p Code	Transaction ID: SA11AI.31031
	Reno	NV 8	9506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		525.00 Bi-Weekly Payroll Contrib-
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator		Bi-Weekly Payroll Contrib- ution \$35.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 770.00	
	Full Name (Last, First, Middle Initial) Katherine A Penatzer			Date of Receipt
	Mailing Address 238 East Penn St.	12 30 2009		
	City Bedfore		p Code 5522	Transaction ID: SA11AI.31033 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	I I I I	175.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator		Bi-Weekly Payroll Contrib- ution \$12.50
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 262.50	
	SUBTOTAL of Receipts This Page (optional)		\	3196.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or fo	information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
1. 1	Full Name (Last, First, Middle Initial) Karen S Petyko Mailing Address 14108 Doffin Street City Cedar Lake	State Zip Code IN 46303	Date of Receipt 1 2 3 0 2 0 0 9 Transaction ID: SA11AI.31035 Amount of Each Receipt this Period
f ! -	PEC ID number of contributing ederal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	Occupation Assistant Administrator Aggregate Year-to-Date 461.60	Bi-Weekly Payroll Contribution \$28.85
3.	Full Name (Last, First, Middle Initial) Karen K Phelps Mailing Address Rt. 4^ Box 87p City Tecumseh FEC ID number of contributing ederal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OK 74873 C Occupation Admin Dir Of Nursing Serv Aggregate Year-to-Date 325.00	Date of Receipt M
. !! ! ! !	Full Name (Last, First, Middle Initial) Luke T Pile Mailing Address 6690 Hauser Rd C-205 City Macungie FEC ID number of contributing ederal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code PA 18062 C Occupation Administrator Aggregate Year-to-Date 337.50	Date of Receipt M
su	BTOTAL of Receipts This Page (optional)		1021.40

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11		
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
/	HCR Manor Care PAC Full Name (Last, First, Middle Initial)				
۱.	Clifton J Porter II Mailing Address 3929 Azalea Circle		Date of Receipt 1 2 2 3 2 0 0 9		
	City Maumee	State Zip Code OH 43537	Transaction ID: SA11AI.31039 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	850.07		
	Name of Employer HCR ManorCare Inc.	Occupation AVP^ Government Relations	Bi-Weekly Payroll Contribution \$65.39		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1487.01			
	Full Name (Last, First, Middle Initial) Michael J Reed		Date of Receipt		
	Mailing Address 3899 Midshore Drive	1 2 2 3 2 0 0 9 Transaction ID: SA11AI.31043			
	City Naples	City State Zip Code Naples FL 34109			
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2500.03		
	Name of Employer HCR Manor Care, Inc.	Occupation VP Assisted Living Operations	Bi-Weekly Payroll Contrib- ution \$192.31		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2884.65			
_	Full Name (Last, First, Middle Initial) Margaret A Reitmeyer		Date of Receipt		
	Mailing Address 13 Gregory Drive		12 23 7 2009		
	City Kenvil	State Zip Code NJ 07847	Transaction ID: SA11AI.31044 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	475.02		
	Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of Operations	Bi-Weekly Payroll Contribution \$36.54		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 758.10			
	SUBTOTAL of Receipts This Page (optional)		3825.12		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Deborah A Reitz Mailing Address 4312 Shangri La Rd. City Stewartstown FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General	State Zip Code PA 17363 C Occupation Regional Director of Ops Aggregate Year-to-Date ▼	Date of Receipt 12 23 2009 Transaction ID: SA11AI.31045 Amount of Each Receipt this Period 487.50 Bi-Weekly Payroll Contribution \$37.50
Full Name (Last, First, Middle Initial) John I Remenar Mailing Address 2723 Rexton Ridge Rd City Toledo FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	State Zip Code OH 43617 C Occupation VP Financial Services Aggregate Year-to-Date 3203.82	Date of Receipt M M
Full Name (Last, First, Middle Initial) Tiffany Remmert Mailing Address 4320 Twp Rd 161 City Marengo FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43334 C Occupation Administrator - Bucyrus Aggregate Year-to-Date ▼ 253.35	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		1460.91

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any person the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of a see that the name and address of a see the name and address of a see the name and address of	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Patricia B Richards Mailing Address P.O. Box 754 City Shady Spring FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code WV 25918 C Occupation Area Human Resource Director Aggregate Year-to-Date 898.21	Date of Receipt M
Full Name (Last, First, Middle Initial) Teresa A Rickett Mailing Address 44 Lookout Ct. City Urbana FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43078 C Occupation Administrator Aggregate Year-to-Date 436.80	Date of Receipt M M 2 0 0 9
Full Name (Last, First, Middle Initial) Damian M Rodgers Mailing Address 4647 Calico Court City Monclova FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43542 C Occupation Legal Counsel Aggregate Year-to-Date 895.00	Date of Receipt M M D D Z Z D D
SUBTOTAL of Receipts This Page (optional)	>	1225.20

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 87 (check only one) X 11a
\	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ 	Full Name (Last, First, Middle Initial) Mary Colleen B Rodgers Mailing Address 5 Jason Ct. City Avondale FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For:	State Zip Code PA 19311 C Occupation Administrator Aggregate Year-to-Date ▼	Date of Receipt 1 2 2 3 2 0 0 9 Transaction ID: SA11AI.31054 Amount of Each Receipt this Period 195.00 Bi-Weekly Payroll Contribution \$15.00
	Full Name (Last, First, Middle Initial) David R Roth Mailing Address 5257 Bentwood Drive City Mason FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 45040 C Occupation Director Of Planning Aggregate Year-to-Date 592.00	Date of Receipt M M D D Z Z D D
	Full Name (Last, First, Middle Initial) Lynette M Rugg Mailing Address 1348 Oakland Circle City N. Aurora FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60542 C Occupation Administrator Aggregate Year-to-Date 702.87	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional)		970.71

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Δ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59/8/ (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	and name and add	and of any point of committee to	
Full Name (Last, First, Middle Initial) Richard G Rump			Date of Receipt
Mailing Address 2423 Heather Glen	Dr		1 2 2 3 2 0 0 9
City	State	Zip Code	Transaction ID: SA11AI.31058
Maumee	OH	43537	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		700.05
Name of Employer HCR ManorCare Inc.	Occupation Dir^ Corp	n porate Communication	Bi-Weekly Payroll Contribution \$53.85
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1077.00	
Full Name (Last, First, Middle Initial) Angela G Russo			Date of Receipt
Mailing Address 4950 Cypress Pike Circle Unit 101			12 31 2009
City	State	Transaction ID: SA11AI.31059	
Virginia Beach	VA	23455	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			810.00
Name of Employer HCR Manor Care, Inc.	Occupation Gen Mgr	n Central Div 4H	Weekly Payroll Contribution \$30.00
Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
Other (specify) ▼		960.00	
Full Name (Last, First, Middle Initial) Sharon Sanda			Date of Receipt
Mailing Address 1288 Evergreen			1 2 2 3 2 0 0 9
City	State	Zip Code	Transaction ID: SA11AI.31061
Elgin	<u>IL</u>	60123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			195.00
Name of Employer HCR Manor Care, Inc.	Occupation Admission	n Ins Director	Bi-Weekly Payroll Contribution \$15.00
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	225.00	
SUBTOTAL of Receipts This Page (optional			1705.05

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
	Full Name (Last, First, Middle Initial) David A Saunders			Date of Receipt
	Mailing Address 14661 Bellino Terrace	Unit 202		12 23 YYYY 12 23 2009
	City	State	Zip Code	Transaction ID: SA11AI.31062
	Bonita Springs	FL	34135	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		203.04
	Name of Employer HCR ManorCare Inc.	Occupatio Administ		Bi-Weekly Payroll Contrib- ution \$25.38
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 203.04	
_	Full Name (Last, First, Middle Initial) Cynthia S Scharp			Date of Receipt
	Mailing Address 1627 N. 1100 E	12 30 7 2009		
	City	Transaction ID: SA11AI.31064		
	Gilman	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		230.00
	Name of Employer HCR ManorCare Inc.	Occupatio Sr Admir		Bi-Weekly Payroll Contrib- ution \$15.00
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 345.00	
	Full Name (Last, First, Middle Initial) Mr. Mark Schroepfer			Date of Receipt
	Mailing Address 2328 Bonnie Brae			12 30 2009
	City	State	Zip Code	Transaction ID: SA11AI.31065
	Santa Ana	CA	92706	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		375.00
	Name of Employer HCR.ManorCare, Inc.	Occupatio Administ		Bi-Weekly Payroll Contribution \$25.00
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 650.00	
		1		808.04

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 87 (check only one) X	
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	on for the purpose of soliciting contributions		
\ \.	Full Name (Last, First, Middle Initial) Mr. Edward Schuch Mailing Address 304 Adriana Court		Date of Receipt	
	City Northhampton	State Zip Code PA 18067	1 2 2 3 2 0 0 9 Transaction ID: SA11Al.31066	
	FEC ID number of contributing federal political committee.	C 10007	Amount of Each Receipt this Period 337.48	
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General	Occupation Administrator Aggregate Year-to-Date	Bi-Weekly Payroll Contribution \$25.96	
_	Other (specify) Full Name (Last, First, Middle Initial)	575.52		
	Kenneth P Schuster Mailing Address 2074 Cameo		Date of Receipt 1 2 2 3 2 0 0 9	
	City	State Zip Code	Transaction ID: SA11AI.31067	
	Lewisville FEC ID number of contributing federal political committee.	TX 75067	Amount of Each Receipt this Period 344.89	
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contribution \$26.53	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 397.95]	
	Full Name (Last, First, Middle Initial) Gregory Seiple		Date of Receipt	
	Mailing Address 1102 Meily Street		1 2 2 3 2 0 0 9	
	City	State Zip Code	Transaction ID: SA11AI.31068	
	Lebanon FEC ID number of contributing federal political committee.	PA 17046	Amount of Each Receipt this Period 260.00	
	Name of Employer HCR Manor Care, Inc.	lame of Employer ICR Manor Care, Inc. Occupation Senior Consultant Systems		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
	SUBTOTAL of Receipts This Page (optional)		942.37	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1				
An	y information copied from such Reports and for commercial purposes, other than using th NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any perse name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.				
\ <u></u>	Full Name (Last, First, Middle Initial) Susan Sexton Mailing Address 7645 Yawberg Road		Date of Receipt				
	City Whitehouse	State Zip Code OH 43571	1 2 3 0 2 0 0 9 Transaction ID: SA11Al.31069				
	FEC ID number of contributing federal political committee.	OH 43571	Amount of Each Receipt this Period 138.16				
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Senior Manager - Tax Aggregate Year-to-Date ▼ 787.18	Bi-Weekly Payroll Contribution \$34.54				
	Full Name (Last, First, Middle Initial) Theresa J Smelser Mailing Address 202 N. Elm Hurst Rd.	Date of Receipt 1 2 2 3 2 0 0 9					
	City	State Zip Code	Transaction ID: SA11AI.31074				
	Prospect Heights FEC ID number of contributing federal political committee.	IL 60070	Amount of Each Receipt this Period 442.00				
	Name of Employer HCR ManorCare Inc.	Occupation Sr Administrator	Bi-Weekly Payroll Contribution \$34.00				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 827.50					
	Full Name (Last, First, Middle Initial) Joyce Louise Smith		Date of Receipt				
	Mailing Address 3521 Cedar Creek Co	ourt	12 23 2009				
	City Maumee	State Zip Code OH 43537	Transaction ID: SA11AI.31075 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	2500.03				
	Name of Employer HCR ManorCare Inc.	Occupation VP^ Clinical Services	Bi-Weekly Payroll Contrib- ution \$192.31				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4629.80					
s	UBTOTAL of Receipts This Page (optional) .		3080.19				

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and some for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
\ \.	Full Name (Last, First, Middle Initial) David W Snyder Jr Mailing Address 3117 Terry Dr. SE		Date of Receipt 1 2 3 0 2 0 0 9
	City Cedar Rapids	State Zip Code IA 52403	Transaction ID: SA11AI.31076 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	225.00
	Name of Employer HCR ManorCare Inc. Receipt For: Primary Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 330.00	Bi-Weekly Payroll Contribution \$15.00
	Full Name (Last, First, Middle Initial) Marionlee J Specter Mailing Address 5286 Sell Road		Date of Receipt 1 2 3 0 2 0 0 9
	City	State Zip Code	Transaction ID: SA11AI.31079
	New Tripoli FEC ID number of contributing federal political committee.	PA 18066	Amount of Each Receipt this Period 490.00
	Name of Employer HCR ManorCare Inc.	Occupation Executive Director	Bi-Weekly Payroll Contribution \$35.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	
_	Full Name (Last, First, Middle Initial) Jane L Stilwell		Date of Receipt
	Mailing Address 2351 S. Rogers		12 23 YYYYY 12 23 2009
	City Springfield	State Zip Code MO 65804	Transaction ID: SA11AI.31083 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	650.00
	Name of Employer HCR Manor Care, Inc.	Occupation Mobile Administrator	Bi-Weekly Payroll Contrib- ution \$50.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional) .	1	1365.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	the (Check only one)
An	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by a e name and address of any political com	any person for the purpose of soliciting contributions imittee to solicit contributions from such committee.
	HCR Manor Care PAC		
۸.	Full Name (Last, First, Middle Initial) Anthony J Stinson		Date of Receipt
	Mailing Address 3 Lynnefield Court		12 30 2009
	City	State Zip Code NJ 08055	Transaction ID: SA11AI.31084
	Medford FEC ID number of contributing federal political committee.	NJ 08055	Amount of Each Receipt this Period 392.00
	Name of Employer HCR ManorCare Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$28.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 588	3.00
. –	Full Name (Last, First, Middle Initial) Sherri L Stoltzfus	Date of Receipt	
	Mailing Address 119 East Manor Dr.		12 23 2009
	City	State Zip Code	Transaction ID: SA11AI.31086
	Lititz	PA 17543	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	243.75
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-Weekly Payroll Contrib- ution \$18.75
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 281	.25
	Full Name (Last, First, Middle Initial) Ms. Victoria Strom		Date of Receipt
	Mailing Address Route 1		12 23 2009
	City	State Zip Code	Transaction ID: SA11AI.31088
	Victoria FEC ID number of contributing federal political committee.	IL 61485	Amount of Each Receipt this Period 390.00
	Name of Employer HCR.ManorCare, Inc.	Occupation MMD	Bi-Weekly Payroll Contribution \$30.00
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
S	JBTOTAL of Receipts This Page (optional) .	l	1025.75

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1				
A	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC						
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. Eric Talbert		Date of Receipt				
	Mailing Address 7231 Stonewater Ct		12 23 2009				
	City Maumee	State Zip Code OH 43537	Transaction ID: SA11AI.31091				
	FEC ID number of contributing federal political committee.	C 45337	Amount of Each Receipt this Period 260.00				
	Name of Employer HCR Manor Care, Inc.	Occupation Div. Director of Operations Support	Bi-Weekly Payroll Contrib- ution \$20.00				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
_	Full Name (Last, First, Middle Initial) Cyndi K Taplin		Date of Receipt				
	Mailing Address 5405 Buttrick SE		1 2 2 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State Zip Code	Transaction ID: SA11AI.31092				
	Alto	MI 49302	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	1064.96				
	Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of Ops	Bi-Weekly Payroll Contrib- ution \$81.92				
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1228.80					
_	Full Name (Last, First, Middle Initial) Rami Ubaydi	1	Date of Receipt				
	Mailing Address 27134 Pumpkin Stree	t	12 23 YYYYY 12 23 2009				
	City	State Zip Code	Transaction ID: SA11AI.31098				
	Murrieta FEC ID number of contributing federal political committee.	CA 92562	Amount of Each Receipt this Period 650.00				
	Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of Operations	Bi-Weekly Payroll Contribution \$50.00				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00					
	SURTOTAL of Receipts This Page (optional)		1974.96				

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 87 (check only one) X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lisa Ulm Mailing Address 217 S. First St. City West Dundee FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60118 C Occupation Business Office Manager Aggregate Year-to-Date 210.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Angela Jane Valadez Mailing Address 1517 W. Chateau Ave City Anaheim FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care Inc. Receipt For: Primary General Other (specify)	State Zip Code CA 92802 C Occupation Admissions Director Aggregate Year-to-Date 260.00	Date of Receipt M M / B B / Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Suzanne Waldo Mailing Address 267 Mather Road City Jenkintown FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code PA 19046 C Occupation Administrator Aggregate Year-to-Date 260.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional) .		500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 87 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Douglas Wanke Mailing Address 13908 Pondview Road City Silver Spring FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code MD 20905 C Occupation Director of Health Planning Aggregate Year-to-Date 1000.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Toni Y Williams Mailing Address 141 Boiling Spring Cir City Southern Pines FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code NC 28387 C Occupation Admin Dir Of Nursing Serv Aggregate Year-to-Date 428.40	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mark A Wilson Mailing Address 140 Packet Drive City Charles Town FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code WV 25414 C Occupation Regional Director of Operations Aggregate Year-to-Date 455.00	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional)		1105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms Sherriann Wood Mailing Address 5 Aberfield Lane City Miamisburg FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 45342 C Occupation RDO - Central Division Region 2 Aggregate Year-to-Date 1178.80	Date of Receipt 1 2 2 3 2 0 0 9 Transaction ID: SA11AI.31110 Amount of Each Receipt this Period 766.22 Bi-Weekly Payroll Contribution \$58.94
Full Name (Last, First, Middle Initial) Julie A Yoxtheimer Mailing Address 249 E Pearl St City Findlay FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 45840 C Occupation Sr Reimbursement Manager Aggregate Year-to-Date 472.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Cynthia M Zalewski Mailing Address 3845 Drummond Rd City Toledo FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43613 C Occupation Senior Attorney Aggregate Year-to-Date ▼ 601.80	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .		1547.78

A.

В.

PAGE 69 / 87 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR Manor Care PAC Full Name (Last, First, Middle Initial) Date of Receipt Daniel A Zawadzki Mailing Address 18910 Mallard Cove 12 23 2009 Zip Code City State Transaction ID: SA11AI.31116 Middleburg Heights OH 44130 Amount of Each Receipt this Period FEC ID number of contributing 208.00 C federal political committee. Bi-Weekly Payroll Contribution \$16.00 Name of Employer HCR Manor Care, Inc. Occupation Administrator Receipt For: Aggregate Year-to-Date General Primary 240.00 Other (specify) Full Name (Last, First, Middle Initial) Harriet D Zomerfeld Date of Receipt Mailing Address 10 Stone Barn Dr 23 2009 City State Zip Code Transaction ID: SA11AI.31119 **Hockessin** DE 19707 Amount of Each Receipt this Period FEC ID number of contributing C 130.00 federal political committee. Bi-Weekly Payroll Contribution \$10.00 Name of Employer HCR ManorCare Inc. Occupation Admin Dir Of Nursing Serv Receipt For: Aggregate Year-to-Date ▼ Primary General

230.00

SUBTOTAL of Receipts This Page (optional)	•	338.00
TOTAL This Period (last page this line number only)	•	93600.83

Other (specify)

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 70 / 87
ITEMIZED RECEIPTS	Use separate schedule(separate	(Crieck Orlly Orle)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 X 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ments may not be sold or used by any ne and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Friends of Roger Kahn for Senate		Date of Receipt
Mailing Address P.O. Box 1627		10 05 7 2009
City	State Zip Code	Transaction ID: SA16.30706
Saginaw	MI 48605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	Refund of original contri- bution made on 01/27/2009
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	>	300.00
TOTAL This Period (last page this line number only)	•	300.00

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page			FOR LIN			R:		PA	AGE 71 /		87	
ITEMIZED DISBURSEMENTS			ļ	21b 27	F	22 28a	X	23 28b	24 28c	F	25 29	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam												5	
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	s and address of any	political co.						0110 111	JIII GUGIT (
Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS						Date of		sburse				Y	
Mailing Address 14 KNIGHTSWOOD DR					08 7 25 7 2009								
City MARLTON	State Zip Co NJ 0805					Amou	nt of	Each	Disburse	men	t this I	Period	
Purpose of Disbursement Donation for event held on 09/14/09			()11		L.	_			10	00.00)	
Candidate Name JOHN H. ADLER				egory/ ype									
Senate X President		010 General											
State: NJ District: 03 Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	SB23.	307	37		
ARCURI FOR CONGRESS						Date of		sburse	ement			V	
Mailing Address P.O. Box 8508						1 ^M 2	M	0	9 /	Ž	0 0 9	9 1	
City Utica	State Zip Co NY 1350					Amou	nt of	Each	Disburse				
Purpose of Disbursement Donation for event held on 12/11/2009			()11		L.	_			10	00.00)	
Candidate Name MICHAEL A. ARCURI		C		egory/ ype									
Senate X President		010 General											
State: NY District: 24 Full Name (Last, First, Middle Initial)						Tropo		an ID.	SB23.	207	40		
BENNET FOR COLORADO						Date	of Di	sburse	ement				
Mailing Address 1900 GRANT STREET S	UITE 1170					1 ^M 2	M	1	^D / \	ž	0 ŏ s	e [*]	
City DENVER	State Zip Co CO 8020					Amou	nt of	Each	Disburse	-			
Purpose of Disbursement Donation for event held on 12/17/2009		Г	()11		L.				10	00.00)	
Candidate Name MICHAEL F BENNET		C	Cat	egory/ ype									
		010 General											
State: CO District: 00													
SUBTOTAL of Disbursements This Page (optional)				>						30	00.00)	

TOTAL This Period (last page this line number only)

	Use separate schedule(s) FOR	R LINE NUMBER: PAGE 72/87 eck only one)
 EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 22 X 23 24 25 27 28a 28b 28c 29
y Information copied from such Reports and State for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Full Name (Last, First, Middle Initial) BENNET FOR COLORADO			Transaction ID: SB23.30741 Date of Disbursement
Mailing Address 1900 GRANT STREET	SUITE 1170		12 M / D 1 A / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City DENVER	State Zip Code 80203		Amount of Each Disbursement this Per 2500.00
Purpose of Disbursement Donation for event held on 12/17/2009 Candidate Name		011 Categor	
MICHAEL F BENNET	ement For: 2010	Type	
X Senate President	Primary X General Other (specify) ▼		
 State: CO District: 00 Full Name (Last, First, Middle Initial) CHARLIE CRIST FOR US SENATE			Transaction ID: SB23.30713 Date of Disbursement
Mailing Address PO BOX 1694			09 / 23 / 2009
City TALLAHASSEE	State Zip Code FL 32302		Amount of Each Disbursement this Per
Purpose of Disbursement Donation for event held on 09/30/09		011	3500.00
Candidate Name CHARLIE CRIST		Categor Type	ry/
X Senate President	ement For: 2010 Primary General Other (specify)		
 State: FL District: 00 Full Name (Last, First, Middle Initial) CLARKE FOR CONGRESS			Transaction ID: SB23.30710 Date of Disbursement
Mailing Address 111-36 200th. Street			09 11 1 2009
City Hollis	State Zip Code NY 11412		Amount of Each Disbursement this Per
Purpose of Disbursement Donation for event held on 09/17/09		011	1000.00
Candidate Name YVETTE D CLARKE		Categor Type	ry/
3 7	ement For: 2010 C Primary General		
Senate President State: NY District: 11	Other (specify)		

SCHEDULE B (FEC Form 3X)

CHEDOLL B (I LC I OIIII	· 1		arate schedule(s)			OR LINE I heck only		п.		L	. ,	= /3/8	<u> </u>
TEMIZED DISBURSEMEN	NTS		category of the Summary Page			21b 27	22 28a	Х	23 28b	24		25 29	
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r for commercial purposes, other than us													
NAME OF COMMITTEE (In Full)													
HCR Manor Care PAC													
Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	SB2	3.30	723	
COMMITTEE TO ELECT CHRIS	S MURPHY								isburse	ement		0	
Mailing Address P.O. Box 127							1 ^M 0	М	[/] 1	9 /	Y	ž o ŏ s) Y
City Cheshire	St.	ate T	Zip Code 06410				Amou	nt o	f Each	Disbur	seme	nt this F	² erio
Purpose of Disbursement						-	L				2	000.00)
Donation for event held on 10/21/09				_	01								
Candidate Name CHRISTOPHER S MR. MURPH	ΙΥ				ateg Typ	gory/ pe							
Office Sought: X House	Disbursem		2010										
Senate President		Primary Other (spe	General										
State: CT District: 05		zaioi (spe	J. J. J. ▼										
Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	SB2	3.30	719	
CUMMINGS FOR CONGRESS	CAMPAIGN	COMMI	ITTEE						isburse				
Mailing Address PO BOX 1631							1 ^M 0	М	/ 1	6 /	Y	ž o ŏ s) ^Y
City BALTIMORE		ate ID	Zip Code				Amou	nt o	f Each	Disbur	seme	nt this F	• erio
Purpose of Disbursement	IVI	עוו	21203	_							1	000.00)
Donation for event held on 10/19/09					01	1		•					
Candidate Name ELIJAH E CUMMINGS					ateg Typ	gory/ be							
Office Sought: X House	Disbursem		2010										
Senate President		Primary Other (spe	General										
State: MD District: 07		Julei (Spe	ecily) ♥										
Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	SB2	3.30	717	
DAVIS FOR CONGRESS/FRIE	NDS OF DAV	/IS						_	isburse				
Mailing Address 5956 W. Race	e Avenue						1 ^M 0	М	0	7	Y	ž o ŏ s) ^Y
City		ate	Zip Code				Amou	nt o	f Each	Disbur	seme	nt this F	 erio
Chicago	IL	-	60644								1	000.00)
Purpose of Disbursement Donation for event held on 10/21/09					01	1		-			1	000.00	_
Candidate Name DANNY K DAVIS				Ca		gory/							
	Disbursem		2010										
Office Sought: X House		Primary	General										
Senate		Sile en é				1							
Senate President		Other (spe											
Senate President State: IL District: 07	C		ecify) 🔻									200 00	
Senate President	C		ecify) 🔻			<u> </u>		_			40	00.00	

ITEMIZED D	B (FEC FOIIII 3X)		ate schedule(s)				NUMBE y one)	:K:		_ P.	-GL	74 / 87
	ISBURSEMENTS	Detailed S	ategory of the ummary Page			1b 27	22 28a		23 28b	24 28c		25 29
	oied from such Reports and Sta curposes, other than using the na											
NAME OF COM HCR Manor C	MMITTEE (In Full) Care PAC											
•	, First, Middle Initial) C PARTY OF WISCONSII	N						sactio of Dis		SB23	.3074	5
Mailing Address	222 W. Washington A Suite 150	venue					1 ^M 2	M /	^D 2	9 /	ž) 0 9 °
City Madison		State WI	Zip Code 53703				Amo	unt of I	Each [Disburs		
Purpose of Disb Donation Candidate Name					011 ategor	y/	L.				100	0.00
Office Sought:	House Disbu Senate President District:	x Primary Other (spec	2010 General	•	Type							
DEMOCRATI	, First, Middle Initial) C SENATORIAL CAMPAIO		EE				Date M_	of Dis				1) 0 9 °
Mailing Address	120 MARYLAND AVE	NUE NE					0 7		3		2 (009
City WASHINGTO)N	State DC	Zip Code 20002				Amo	unt of I	Each [Disburs	ement t	this Pe
Purpose of Disb Donation	ursement						L.		•		1000	0.00
Candidate Name	9				ategor Type	y/						
Office Sought:	House Disbu Senate President District:	X Primary Other (spec	2010 General									
	, First, Middle Initial) OR CONGRESS						Date	of Dis	burse			
	650 Fox Trails Way						1 ^M 2	М /	0	9 /	Ý Ž() 0 9 °
Mailing Address												thic Do
Mailing Address City Cincinnati		State OH	Zip Code 45233				Amo	unt of I	Each [Disburs		
City Cincinnati Purpose of Disb Donation for eve	oursement ent held on 12/10/2009				011		Amo	unt of I	Each [Disburs		0.00
City Cincinnati Purpose of Disb Donation for eve Candidate Name STEVEN L DI	oursement ent held on 12/10/2009 e RIEHAUS	ОН	45233	Ca	011 ategor Type	y/	Amor	unt of I	Each (Disburs		
City Cincinnati Purpose of Disb Donation for eve	oursement ent held on 12/10/2009 e RIEHAUS		2010 General	Ca	ategor	y/	Amoi	unt of I	Each [Disburs		

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	(check only	NUMBER: PAGE 75 / 87
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Full Name (Last, First, Middle Initial) EARL POMEROY FOR CONGRESS			Transaction ID: SB23.30742 Date of Disbursement
Mailing Address Post Office Box 9336			12 14 2009
City Fargo	State Zip Code ND 58106		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 12/17/2009		011	1000.00
Candidate Name EARL R. POMEROY		Category/ Type	
Senate President	ement For: 2010 (Primary General Other (specify)		
State: ND District: 00 Full Name (Last, First, Middle Initial)			Transaction ID: SB23.30677
ENZI FOR US SENATE			Date of Disbursement
Mailing Address PO BOX 2775			09 08 2009
City CODY	State Zip Code WY 82414		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 09/24/09		011	3500.00
Candidate Name MICHAEL B ENZI		Category/ Type	
	ement For: 2014 (Primary General Other (specify)		
State: WY District: 00 Full Name (Last, First, Middle Initial)			Transaction ID: CD00 00040
EVERY REPUBLICAN IS CRUCIAL (ERI	CPAC)		Transaction ID: SB23.30649 Date of Disbursement
Mailing Address 25 East Main Street Sui	te 200		$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
City Richmond	State Zip Code VA 23219		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 07/15/09		011	1000.00
Candidate Name ERIC CANTOR		Category/ Type	
Senate President	ement For: 2010 (Primary General Other (specify)		
State: VA District: 07			
SUBTOTAL of Disbursements This Page (optional			5500.00

SCHEDIII E B (FEC Form 3Y)

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and St or for commercial purposes, other than using the I			
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Full Name (Last, First, Middle Initial) FRANK KRATOVIL FOR CONGRESS			Transaction ID: SB23.30731 Date of Disbursement
Mailing Address 222 Main Sail Drive PO Box 518			111
City Stevensville	State Zip Code MD 21666		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 11/30/09		011	1500.00
Candidate Name FRANK M MR. JR KRATOVIL	2010	Category/ Type	
Senate President	ursement For: 2010 X Primary General Other (specify) ▼		
State: MD District: 01 Full Name (Last, First, Middle Initial)			Transaction ID: SB23.30669
FRIENDS FOR GREGORY MEEKS			Date of Disbursement
Mailing Address 153-01 Jamaica Ave.			0 8 M / 2 5 / Y 2 0 0 9 Y
City Jamaica	State Zip Code NY 11432		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 09/18/09		011	1000.00
Candidate Name GREGORY W. MEEKS		Category/ Type	
Senate President	ursement For: 2010 X Primary General Other (specify)		
State: NY District: 06 Full Name (Last, First, Middle Initial) FRIENDS OF BYRON DORGAN			Transaction ID: SB23.30732 Date of Disbursement
Mailing Address 122 Maryland Avenue	e NE		M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Suite 3A City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 12/02/2009		011	1000.00
Candidate Name BYRON L DORGAN		Category/ Type	
Office Sought: House Disb X Senate President	wrsement For: 2010 X Primary General Other (specify)		
State: ND District: 00			
SUBTOTAL of Disbursements This Page (option	nal)	>	3500.00
TOTAL This Period (last page this line number of	only)		

CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	FOR LIN (check or	E NUMBER: PAGE 77 / 87
 EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28 28b 28c 29
y Information copied from such Reports and Sta for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
 Full Name (Last, First, Middle Initial) FRIENDS OF CHRIS DODD			Transaction ID: SB23.30727 Date of Disbursement
Mailing Address PO BOX 270701			
City WEST HARTFORD	State Zip Code CT 06127		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 11/06/09		011	1000.00
Candidate Name CHRISTOPHER J DODD		Category/ Type	
X Senate President	rsement For: 2010 X Primary General Other (specify)		
State: CT District: 00 Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER			Transaction ID: SB23.30647 Date of Disbursement
Mailing Address 7908-I2 Cincinnati Da	yton Road		$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} 7^{M} & \begin{smallmatrix} M \\ \end{smallmatrix} 0^{M} 1^{M} & \begin{smallmatrix} D \\ O \end{smallmatrix} 1^{D} & \begin{smallmatrix} Y \\ V \end{smallmatrix} 2^{Y} 0^{Y} 9^{Y} \end{bmatrix}$
City West Chester	State Zip Code OH 45069		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 07/07/09		011	5000.00
Candidate Name JOHN A BOEHNER		Category/ Type	
Senate President	rrsement For: 2010 X Primary General Other (specify) ▼	•	
State: OH District: 08 Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER			Transaction ID: SB23.30648 Date of Disbursement
Mailing Address 7908-I2 Cincinnati Da	yton Road		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City West Chester	State Zip Code OH 45069		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 07/07/09		011	2500.00
Candidate Name JOHN A BOEHNER		Category/ Type	
Office Sought: X House Disbu	rsement For: 2010 Primary X General	•	
President State: OH District: 08	Other (specify)		

SCHEDULE B (FEC For TEMIZED DISBURSEMI	' Use	separate schedule(seach category of the	FOR LINI (check or	<u> </u>	PAGE 78/87
	Deta	ailed Summary Page	27	22 X 23 28a 28b	24 25 29 29
ny Information copied from such Rep r for commercial purposes, other than					
NAME OF COMMITTEE (In Full) HCR Manor Care PAC		, μ			
Full Name (Last, First, Middle Initia FRIENDS OF SCHUMER	l)			Transaction ID: S Date of Disbursement	
Mailing Address 509 MADIS	ON AVE SUITE 19	02		09 / 08	2009
City NEW YORK	State NY	Zip Code 10022	_	Amount of Each Dis	sbursement this Perio
Purpose of Disbursement Donation for event held on 09/08/09	9		011		2000.00
Candidate Name CHARLES E SCHUMER			Category/ Type		
Office Sought: House X Senate President	Disbursement F X Prima Other				
State: NY District: 00 Full Name (Last, First, Middle Initia	<u> </u>			Transaction ID:	SB23.30730
FRIENDS OF SCHUMER				Date of Disburseme	
Mailing Address 509 MADIS	ON AVE SUITE 19	02		111 / 25	2009
City NEW YORK	State NY	Zip Code 10022		Amount of Each Dis	sbursement this Perio
Purpose of Disbursement Donation for event held on 11/10/20	009		011		5000.00
Candidate Name CHARLES E SCHUMER			Category/ Type		
Office Sought: House X Senate President	Disbursement F Prima Other				
State: NY District: 00 Full Name (Last, First, Middle Initia					
GARDNER FOR CONGRESS				Transaction ID: S Date of Disbursement	ent
Mailing Address PO BOX 24	08			111 09	y žoóg
City LOVELAND	State CO	Zip Code 80539		Amount of Each Dis	sbursement this Perio
Purpose of Disbursement Contribution			011		1000.00
Candidate Name CORY GARDNER			Category/ Type		
Office Sought: X House Senate President	Disbursement F X Prima Other				
State: CO District: 04					

	CHEDULE B (FEC Form 3	' Use	separate schedule(s)		R LINE	NUMBE	R:		ı	PAGE	79 / 8	37
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	y Information copied from such Reports a for commercial purposes, other than using												;
01	NAME OF COMMITTEE (In Full)	j ille flame and a	duress or any pointe	ai coi	11111111	ee 10 St	DIICIL COITLI	ibuti	0115 11	om suci	I COIIII	TIILLEE	
\rangle	HCR Manor Care PAC												
	Full Name (Last, First, Middle Initial) HALVORSON FOR CONGRESS						Date	of Di	sburs	: SB2 ement			
	Mailing Address PO Box 176						0 9	M /	D 1	1 /	ÝŽ	0 0 9) \
	City Crete	State IL	Zip Code 60417				Amou	int of	Each	Disbur			-
	Purpose of Disbursement Donation for event held on 09/15/09				01	1	L.	_			10	00.00	
	Candidate Name DEBORAH 'DEBBIE' HALVORSO	N			Categ Typ								
	Office Sought: X House Senate President	Disbursement F X Prima Other											
	State: IL District: 11												
	Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE	INC								: SB2 ement	3.306	52	
	Mailing Address 175 SOUTH WE	ST TEMPLE S	SUITE 650				0 ^M 7	M /	D 1	^D 4	Ý Ž	0 0 9) Y
	City SALT LAKE CITY	State UT	Zip Code 84101				Amou	int of	Each	Disbur	semen	t this F	Perio
	Purpose of Disbursement Donation for event held on 07/23/09				01	1	L.				25	00.00	
	Candidate Name ORRIN G HATCH				Categ Typ	•							
	Office Sought: House X Senate President	Disbursement F X Prima Other											
	State: UT District: 00												
	Full Name (Last, First, Middle Initial) HOOSIERS FOR HILL						Date	of Di	sburs	: SB2 ement			
	Mailing Address PO Box 1071						10	M /	D 1	9 /	ž	0 0 9) `
	City Seymour	State IN	Zip Code 47274				Amou	int of	Each	Disbur		-	
	Purpose of Disbursement Donation for event held on 10/21/09				01		L.	•	0		25	00.00	
	Candidate Name BARON P HILL				Categ Typ								
	Office Sought: X House Senate President	Disbursement F X Prima Other											
	State: IN District: 09												
												00.00	

ITEMIZ		3 (FEC Form		Use sepa	rate schedule(s)		-	IE NUMBER: PAGE 80 / 87
	ZED DIS	SBURSEMEN	TS	for each o	category of the Summary Page		(check or 21b 27	nly one) 22 X 23 24 25 2 28a 28b 28c 29
							ny persor	n for the purpose of soliciting contributions solicit contributions from such committee
NAME	•	MITTEE (In Full)	ig the name	and addres	ss of any political	COIIII	THILLEGE TO S	Solicit Contributions from Such Committee
	•	First, Middle Initial) FOR CONGRESS						Transaction ID: SB23.30743 Date of Disbursement
	g Address	150 SMOKERI						M M / D D D Y 2 0 0 9
City WAD	SWORTH			State OH	Zip Code 44281			Amount of Each Disbursement this Period
Purpos Donati	se of Disbu ion	rsement				(011	1000.00
JAME	date Name ES B REN						tegory/ Type	
	Sought:	X House Senate President		nent For: Primary Other (spe	2010 General cify) ▼			
		District: 16 First, Middle Initial) IGRESS						Transaction ID: SB23.30735 Date of Disbursement
Mailinç	g Address	100 W. College 50 D	Ave.					M M / D B / Y Y Y O O 9
City Apple	eton			State N I	Zip Code 54911			Amount of Each Disbursement this Period
		rsement t held on 12/16/2009					011	1000.00
	date Name						tegory/ Type	
	EN L KA	GEN						
STEV	Sought:	X House Senate President		nent For: Primary Other (spec	2010 General			
STEV Office State:	Sought: WI ame (Last, I	X House Senate President District: 08 First, Middle Initial)	X	Primary	General			Transaction ID: SB23.30707 Date of Disbursement
STEV Office State: Full Na KIND	Sought: WI ame (Last, I	X House Senate President District: 08 First, Middle Initial) NGRESS COMMI	TTEE	Primary	General			Transaction ID: SB23.30707 Date of Disbursement O 9 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
STEV Office State: Full Na KIND	WI ame (Last, I FOR CO	X House Senate President District: 08 First, Middle Initial) NGRESS COMMI	TTEE South	Primary	General			Date of Disbursement
STEV Office State: Full Na KIND Mailing City La Cr Purpos Donati	WI ame (Last, I FOR CO g Address rosse se of Disbu ion for even	X House Senate President District: 08 First, Middle Initial) NGRESS COMMI 205 5th Avenue Suite 428	TTEE South	Primary Other (spec	General cify) ▼ Zip Code		011	Date of Disbursement M M M / D D D / Y 2 0 0 9
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STEV Office State: Full Na KIND Mailing City La Cr Purpos Donatic Candic RON	WI ame (Last, I FOR CO g Address rosse se of Disbu ion for even date Name KIND Sought:	X House Senate President District: 08 First, Middle Initial) NGRESS COMMI 205 5th Avenue Suite 428	TTEE South Disburser	Primary Other (spec	General cify) ▼ Zip Code 54601 2010 General	() Car	tegory/	Date of Disbursement M 9 M / D 1 D / Y 2 0 0 9 Y Amount of Each Disbursement this Period

SCHEDULE B (FEC Form 3X	Use separate schedule(s)	-	NUMBER: PAGE 81 / 87
ITEMIZED DISBURSEMENTS		(check only	y one)
	, 0	27	28a 28b 28c 29 30b
Any Information copied from such Reports and or for commercial purposes, other than using t			
NAME OF COMMITTEE (In Full)	The Harrie and address of any political		not contributions from such committee
HCR Manor Care PAC			
Full Name (Last, First, Middle Initial) A. KLEIN FOR CONGRESS			Transaction ID: SB23.30712
A. KLEIN FOR CONGRESS			Date of Disbursement
Mailing Address 301 Yamato Road Suite 2198			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & \check{Y} & \check{O} & \check{O} & 9 \end{smallmatrix} \end{bmatrix}$
City BOCA RATON	State Zip Code FL 33433		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 09/14/09		011	2500.00
Candidate Name RON KLEIN		Category/ Type	
Senate	Disbursement For: 2010 X Primary General		
State: FL District: 22	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: SB23.30724
B. MCNERNEY FOR CONGRESS			Date of Disbursement
Mailing Address 6520 Village Parky Second Floor	vay		10 M / D D D / Y Y Y O O 9 Y
City Dublin	State Zip Code CA 94568		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 10/21/09		011	2000.00
Candidate Name JERRY MCNERNEY		Category/ Type	
Office Sought: X House Senate President State: CA District: 11	Disbursement For: 2010 X Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID. CD00 00000
C. MIKE CRAPO FOR US SENATE			Transaction ID: SB23.30662 Date of Disbursement
Mailing Address PO BOX 1948			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & O \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & P \\ I & I & O & O & I \end{bmatrix} $
City BOISE	State Zip Code ID 83701		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 08/11/09		011	3000.00
Candidate Name MICHAEL D CRAPO		Category/ Type	
	Disbursement For: 2010 X Primary General	NI	
State: ID President District: 00	Other (specify)		
SUBTOTAL of Disbursements This Page (op	otional)		7500.00
TOTAL This Period (last page this line numb	er only)		

	CHEDULE B (FEC FOIIII 3X)	Use separate schedule(s) FOR LINE (check on	E NUMBER: PAGE 82 / 87
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28 28 28 29 29
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	NAME OF COMMITTEE (In Full) HCR Manor Care PAC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
/	Full Name (Last, First, Middle Initial) NORTH DAKOTA DEMOCRATIC-NONI	PARTISAN LEAGUE PAR	ΤΥ	Transaction ID: SB23.30676 Date of Disbursement
	Mailing Address PO BOX 4225			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 8 \end{bmatrix} / \begin{bmatrix} y & y & y & 0 & y \\ 2 & 0 & 0 & 9 & y \end{bmatrix}$
	City BISMARCK	State Zip Code ND 58502		Amount of Each Disbursement this Perio
	Purpose of Disbursement Donation for event held on 09/16/09 Candidate Name		011	5000.00
		rsement For: 2010	Category/ Type	-
	Senate President	X Primary General Other (specify)		
	State: District: Full Name (Last, First, Middle Initial) ORRINPAC			Transaction ID: SB23.30716 Date of Disbursement
	Mailing Address 175 S. WEST TEMPL	E SUITE 650		10 M / D D / Y 2 0 0 9 Y
	City SALT LAKE CITY	State Zip Code UT 84101		Amount of Each Disbursement this Perio
	Purpose of Disbursement Donation		012	5000.00
	Candidate Name		Category/ Type	
	Office Sought: House Disbu	rsement For: 2010 X Primary General Other (specify) ▼		
	Full Name (Last, First, Middle Initial) PAC TO THE FUTURE			Transaction ID: SB23.30664 Date of Disbursement
	Mailing Address 607 14th Street, NW Suite 800			$\begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix}$
	City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Perio
	Purpose of Disbursement Donation for event held on 08/13/09 Candidate Name		011 Category/	5000.00
	Senate President	rsement For: 2010 X Primary General Other (specify)	Туре	
	State: District:			

SCHEDULE B (FEC Form TEMIZED DISBURSEMEN	for each category of the	(check onl	<u> </u>
	Detailed Summary Page	27	22 X 23 24 25 28 28a 28b 28c 29
any Information copied from such Report or for commercial purposes, other than us			for the purpose of soliciting contributions olicit contributions from such committee
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Full Name (Last, First, Middle Initial) PAT ROBERTS VICTORY COM	IMITTEE; THE		Transaction ID: SB23.30653 Date of Disbursement
Mailing Address 610 S BOULE	VARD		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
City TAMPA	State Zip Code FL 33606		Amount of Each Disbursement this Perio
Purpose of Disbursement Donation for event held on 07/22/09		011	2000.00
Candidate Name PAT ROBERTS		Category/ Type	
Office Sought: House X Senate President	Disbursement For: 2010 X Primary Genera Other (specify) ▼		
State: KS District: 00			
Full Name (Last, First, Middle Initial) PORTMAN FOR SENATE COM	MITTEE		Transaction ID: SB23.30674 Date of Disbursement
Mailing Address 8331 LITTLE I	HARBOR DRIVE		$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} & \begin{smallmatrix} M \\ \end{smallmatrix} & \begin{smallmatrix} J \\ \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D \\ O \end{smallmatrix} & \begin{bmatrix} D \\ D \end{bmatrix} & \begin{smallmatrix} J \\ \end{smallmatrix} & \begin{bmatrix} Y \\ D \end{smallmatrix} & \begin{bmatrix} Y \\ D \end{smallmatrix} & \begin{bmatrix} J \\ D \end{smallmatrix} & \begin{bmatrix} J \\ D \end{bmatrix} & \begin{bmatrix} J \\ D \end{smallmatrix} & \begin{bmatrix} J \\ D \end{bmatrix} & \begin{bmatrix} \mathsf$
City CINCINNATI	State Zip Code OH 45244		Amount of Each Disbursement this Perio
Purpose of Disbursement Donation for event held on 09/08/09	011 10211	011	1000.00
Candidate Name ROB PORTMAN		Category/ Type	
Office Sought: House X Senate President	Disbursement For: 2010 Primary X Genera Other (specify) ▼	1	
State: OH District: 00 Full Name (Last, First, Middle Initial)			
PORTMAN FOR SENATE COM	MITTEE		Transaction ID: SB23.30675 Date of Disbursement
Mailing Address 8331 LITTLE I	HARBOR DRIVE		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & 9 \end{smallmatrix} \end{bmatrix}$
City CINCINNATI	State Zip Code OH 45244		Amount of Each Disbursement this Perio
Purpose of Disbursement Donation for event held on 09/08/09		011	4000.00
Candidate Name ROB PORTMAN		Category/ Type	
Office Sought: House X Senate President	Disbursement For: 2010 X Primary General Other (specify) ▼	1	
State: OH District: 00	Other (Specify)		

ITE		13X)	Use sepa	arate schedule(s)		FOR LIN	 						
	MIZED DISBURSEME	NTS	for each	category of the Summary Page		(check of 21b) 27	one) 22 28a	X 23		24 28c	П	25 29	
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N	IAME OF COMMITTEE (In Full) ICR Manor Care PAC	omig and mame		or any pointed			,		<u> </u>				
	ull Name (Last, First, Middle Initial) ORTMAN FOR SENATE COM	MITTEE						action of Disb			.3071	18	
M	failing Address 8331 LITTLE	HARBOR D	RIVE				1 ^M 0	M /	13	/ [ž	0 ŏ 9	Y
	ity INCINNATI		State OH	Zip Code 45244			Amou	nt of E	ach Di	sburse			erio
D	curpose of Disbursement conation for event held on 09/08/09 candidate Name					011 tegory/	L.	•	•		160	00.00	0
R	ROB PORTMAN Office Sought: House	Disburser	ment For:	2010		ype							
	X Senate President		Primary Other (spe	X General									
Fı	tate: OH District: 00 ull Name (Last, First, Middle Initial) PORTMAN FOR SENATE CON	_ MITTEE						action			.3073	34	
_	failing Address 8331 LITTLE		RIVE				1 ^M 2		07		ž	o ŏ 9	Y
	ity		State	Zip Code			Amou	nt of Ea	ach Di	sburse	ement	this P	erio
С	CINCINNATI	(OH	45244									
P	urpose of Disbursement conation for event held on 12/08/09	(OH	45244		011					240	00.00	
Pr D	urpose of Disbursement	(OH	45244	Ca	011 tegory/					240	00.00	
Pi Di C R	urpose of Disbursement conation for event held on 12/08/09 candidate Name ROB PORTMAN office Sought: House X Senate President	Disburse	_	2010 X General	Ca	tegory/					240	00.00	
Pr D C R O	urpose of Disbursement conation for event held on 12/08/09 candidate Name ROB PORTMAN office Sought: White Sought House X Senate President Late: OH District: 00 ull Name (Last, First, Middle Initial)		ment For: Primary	2010 X General	Ca	tegory/	Trans	action	ID:	SB23.	•		
Pi D C R O	urpose of Disbursement conation for event held on 12/08/09 candidate Name ROB PORTMAN office Sought: Thouse X Senate President tate: OH District: 00 ull Name (Last, First, Middle Initial) SENATE MAJORITY FUND	Disburse	ment For: Primary	2010 X General	Ca	tegory/	Date of	action of Disbo	ursem	ent	3065	50	Y
Pro C C R O Si Si S S M	contain for event held on 12/08/09 candidate Name condition for event	Disburser	ment For: Primary Other (spe	2010 X General cify) ▼	Ca	tegory/	Date of	of Disbo	o 9	ent	3065 (ž	50 0 ŏ 9	
Pr D C R O	urpose of Disbursement conation for event held on 12/08/09 candidate Name ROB PORTMAN Office Sought: House X Senate President Latate: OH District: 00 ull Name (Last, First, Middle Initial) SENATE MAJORITY FUND Mailing Address P.O. Box 320 City Choenix	Disburser	ment For: Primary	2010 X General	Ca	tegory/	Date of	of Disb	o 9	ent	3065 2	50 0 ŏ 9	
Pr D C C R O O Si Si S P P P D D	urpose of Disbursement conation for event held on 12/08/09 candidate Name ROB PORTMAN office Sought: House X Senate President tate: OH District: 00 ull Name (Last, First, Middle Initial) SENATE MAJORITY FUND failing Address P.O. Box 320 city	Disburser	ment For: Primary Other (spe	2010 X General cify) ▼	Cat	tegory/ ype	Date of	of Disbo	o 9	ent	3065 2	50 0 0 9 this P	
Pr D C R O Si S M C P Pr D C C J C	contain for event held on 12/08/09 candidate Name condition for event held on 07/14/09 candidate Name	Disburser	ment For: Primary Other (spe	2010 X General cify) ▼ Zip Code 85064	Cat T	tegory/ ype	Date of	of Disbo	o 9	ent	3065 2	50 0 0 9 this P	
Production of the control of the con	urpose of Disbursement conation for event held on 12/08/09 candidate Name ROB PORTMAN Office Sought: House X Senate President Latate: OH District: 00 ull Name (Last, First, Middle Initial) ENATE MAJORITY FUND Mailing Address P.O. Box 320 City Choenix Urpose of Disbursement Conation for event held on 07/14/09 Candidate Name	Disburser	ment For: Primary Other (spe	2010 X General cify) ▼ Zip Code 85064 2010 X General	Cat T	tegory/ Type D11 tegory/	Date of	of Disbo	o 9	ent	3065 2	50 0 0 9 this P	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 85 / 87
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	,	, , ,	
NAME OF COMMITTEE (In Full)			
HCR Manor Care PAC			
Full Name (Last, First, Middle Initial)			Transaction ID: SB23.30725
ZACK SPACE FOR CONGRESS COMMIT	TEE		Date of Disbursement
Mailing Address 123 West High Avenue			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code OH 44663		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 10/21/09	Г	011	2500.00
Candidate Name ZACHARY T SPACE		Category/ Type	
Office Sought: X House Senate X President	ment For: 2010 Primary General Other (specify)		
State: OH District: 18	·		

SUBTOTAL of Disbursements This Page (optional)	•	2500.00
TOTAL This Period (last page this line number only)	<u> </u>	99000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	1 -	NUMBER: PAGE 86 / 87
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	y one) 22
		27	28a 28b 28c X 29
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)	,,		
HCR Manor Care PAC			
Full Name (Last, First, Middle Initial)			Transaction ID: SB29.30659
Friends of Anthony Brown			Date of Disbursement
Mailing Address 1010 Hull Street #202			$\begin{bmatrix}\begin{smallmatrix}M\\O^T\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\D^T\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\D^T\end{smallmatrix}\end{bmatrix}^Y \begin{bmatrix}\begin{smallmatrix}Y\\D^T\end{smallmatrix}\end{bmatrix} \begin{bmatrix}Y\\D^T\end{smallmatrix}\end{bmatrix}^Y \begin{bmatrix}Y\\D^T\end{smallmatrix}\end{bmatrix}$
City Baltimore	State Zip Code MD 21230		Amount of Each Disbursement this Period
Purpose of Disbursement	WD 21230		3750.00
Donation for event held on 07/29/09			
Candidate Name		Category/ Type	
Office Sought: House Disburs	ement For:		
Senate President	Primary General Other (specify) ▼		
State: District:	_ Other (specify) \		
Full Name (Last, First, Middle Initial)			Transaction ID: SB29.30721
Friends of Armond Budish			Date of Disbursement
Mailing Address 23240 Chagrin Blvd. Building 4			$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1^M&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D\\1^M&9\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2^M&0^M&9\end{smallmatrix}\end{bmatrix}$
City Beachwood	State Zip Code OH 44122		Amount of Each Disbursement this Period
Purpose of Disbursement Donation for event held on 11/05/09			1000.00
Candidate Name		Category/ Type	
· H	ement For:		
Senate President	Primary General Other (specify)		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)	•		Transaction ID: SB29.30715
Pennsylvania Health Care Association PA	iC		Date of Disbursement
Mailing Address 315 N. Second Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
City Harrisburg	State Zip Code PA 17101		Amount of Each Disbursement this Period
Harrisburg Purpose of Disbursement	1/101		1000.00
Donation			
Candidate Name		Category/ Type	
° 🗎	ement For:	•	
Senate	Primary General		
President	Other (specity)		
State: President State:	Other (specify)		
			5750.00

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	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER:	PAGE 87 / 87
	ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 23 27 28a 28b	24 25 26 28c X 29 30b
	Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
	Full Name (Last, First, Middle Initial)		Transaction ID: SI	R29 30746
Α.	Strickland for Governor		Date of Disbursemen	nt
	Mailing Address 65 East State Street Suite 1800		12 M / 14	Ž 0 0 9 °
	City Columbus	State Zip Code OH 43215	Amount of Each Disk	oursement this Period
	Purpose of Disbursement Donation for event held on 12/16/09			2000.00
	Candidate Name	C	Category/ Type	
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
	State: District:			
В.	Full Name (Last, First, Middle Initial) Teresa Fedor for Senate Committee		Transaction ID: SI Date of Disbursemen	
	Mailing Address 2054 Belvedere Drive		111 25	2009
	City Toledo	State Zip Code OH 43614	Amount of Each Disk	oursement this Period
	Purpose of Disbursement Donation			300.00
	Candidate Name	C	Category/ Type	
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	•	2300.00
TOTAL This Period (last page this line number only)	•	8050.00

State:

District: